Enquiry Form

Information about yourself Name Designation Organisation: **Nationality** Postal address : Location Telephone Mobile Fax Email Type of service needed Additional information Information about your debtor Debtor name : Contact name: (third party contact) **Nationality** Organisation :_____ Designation Postal address : Location ·_____ Mobile Telephone Fax Email Amount due :_____ Currency Earliest date of Indebtedness: Debtor History : Brief description of the debt and of your product/service: ☐ Check returned ☐ Disputed ☐ Claims inability to pay ☐ Mail returned ☐ Phone disconnected ☐ No response \square Others (specify): Documents available:

S.	Document	Date	Last Action	Result
1.				
2.				

S.	Document	Date	Last Action	Result
3.				
4.				
5.				

Other comments:			

Fax this form back to us on $(+971\ 6)\ 5564224$, and a member of our team will contact you within three working days. Alternatively, you may call us on $(+\ 971\ 6)5569503$, or email us at $\underline{info@tahseel.com}$ with a summary of your situation, and we will revert to you at out earliest.