

## **CLIENT CONTACT SURVEY**

Company Name (As per the Licence): Company Account Number:

## COMPANY CONTACT DETAILS

Email (in capital letters): Phone Number: Fax: Mobile Number:

## MANAGER CONTACT DETAILS - IN UAE

Address:	
P.O Box:	
Emirate:	
Contact No. (Office):	
Residence:	
Mobile:	
Email:	

## MANAGER CONTACT DETAILS - PERMANENT (HOME COUNTRY)

Address:	
P.O Box No. / Zip Code:	
City:	
Country:	
Contact No. (Office):	
Residence:	
Mobile:	
Email:	

By signing below, I hereby certify that I am the authorized person to act on behalf of the abovementioned entity.

I hereby confirm that the abovementioned information are true and correct and I hereby request Ras Al Khaimah Economic Zone Authority to update the contact details of the abovementioned entity with the details provided above.

Name:	Position / Capacity:	Owner	Manager	Partner	Consultant
Date:	Signature & Stamp:				