



## CREDIT APPLICATION FORM

### A. CUSTOMER DETAILS

#### A.1 Details of the Organization

Name: Hueck Middle East Aluminium Systems LLC		
Address: P.O. Box 62194, DIP 2, Plot No. 597-963 - Community 597, Street 72		
City / Emirate: Dubai, United Arab Emirates		
Office Tel. # +971 4 804 8600 EXT: 116	E-mail: logistics@hueck.ae / akram.henidi@hueck.ae	Web: www.hueck.ae

#### Bank Details \*

Name:	HUECK MIDDLE EAST ALUMINIUM SYSTEMS LLC	
Branch:	National Bank of Fujairah	
Address:		
Account No./ IBAN	012001568707 / AE860380000012001568707	SWIFT code: NBFUAEAFDXB
Type of Account.	Bussiness	

#### A.2 Key Personnel / Authorized Signatory / Management\*

Department	Name in Full	Designation	Email Id and Mobile Number
Finance	Mohammad Arif Khan	Accountant	arif@hueck.ae
Procurement	Mohamed Fazil	Purchasing & Logistics	logistics@hueck.ae / +971 4 804 8600 Ext: 116
Management	Mr. Akram Henidi	SCM	Akram Henidi <akram.henidi@hueck.ae>
Authorized Signatory			

### B. CREDIT - TERMS & CONDITIONS

#### B.1 Credit Facility Request

Credit Limit (AED) *	Payment Term (days)
	60 Days

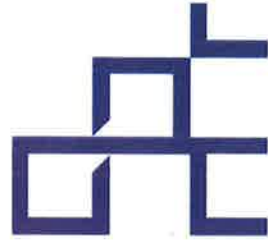
#### Credit Cycle\*

1. Per Invoice*	<input checked="" type="checkbox"/>
2. Monthly Cycle**	<input type="checkbox"/>

\*Credit Term starts from Invoice Date and is to be paid as and when it is due

\*\*Monthly Credit Term – All invoices raised in a month is to be paid for in 1<sup>st</sup> week of following month

(\*) Fields are mandatory to be filled


**B.2 Authorized Signatory and Job Approver for PO / Email\***

Role	Name in Full	Designation	Email Id and Mobile Number
Job Executor	Mohamed Fazil	Purchasing & Logistics	logistics@hueck.ae / +971 48048600 Ext: 116
Job Approver	Mohamed Fazil	Purchasing & Logistics	logistics@hueck.ae / +971 48048600 Ext: 116
Cheque Signatory	Modar Al Mekdad	Managing Partner	NIL

(\*) Fields are mandatory to be filled

**B.3 Documents to be attached**

- Trade License Copy
- VAT TRN
- Passport Copy – Owner & Signatory

**B.4 Customer Declaration**


<b>1. Company Name</b>	<b>Contact Person and Number</b>
Address:	
Credit Limit (AED):	
<b>2. Company Name</b>	<b>Contact Person and Number</b>
Address:	
Credit Limit (AED):	

**B.5 Customer Declaration**

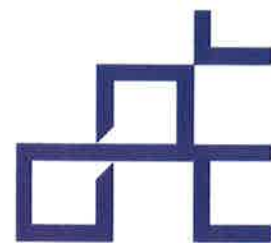
I/ We certify that the above stated details are true and correct. I/We also hereby authorize Infinity Logistics to contact our bankers as mentioned above. I/We agree to settle invoices as per the payment term agreed by Infinity Logistics. In the case of any disputed invoices, the undisputed value will be settled according to the agreed terms set above and the dispute resolved within 7 days.

Any dispute will be governed by the law applicable in the United Arab Emirates and its jurisdiction.

Name of Authorized Person: Mr. Akram Henidi Designation in the Company: Supply Chain Manager

<b>Signature</b> 
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<b>Company Stamp</b>  Supply Chain : ..... Date : .....
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Terms and Conditions

- All our invoices are presumed to be accurate unless we receive a written notification within seven days of receipt.
- The account facility will be suspended without prior notice in the following situations:
  - a. If the Invoice is not paid within the payment period stipulated above or as agreed upon.
- The First Party agrees to be bound by the Standard Trading Conditions of the Second Party. Our standard trading conditions are subject to the jurisdiction of U.A.E.

Acceptance of Account Facility Request  
( to be completed by Infinity Logistics )

Approved by: \_\_\_\_\_ Issued Date: \_\_\_\_\_