



## CREDIT APPLICATION FORM

### A. CUSTOMER DETAILS

#### A.1 Details of the Organization

Company Name: Morgan Inland FZ LLC		
Full Address: BC-4 RAKEZ Business Zone, Office 203-A RAK,UAE		
City / Emirate: Ras Al Khaimah		
Office Tel. # 971 7 2075485	E-mail: aaqib@miatlantic.ae	Web: http://www.miatlantic.ae/

Trade License No : 5019535	
VAT TRN : 100541560700003	
Date of Inception: 19-04-2018	Date of Expiry 18-04-2025

<b>Bank Details * RAK BANK - NATIONAL BANK OF RAS ALKHAJMAH</b>	
Name:	MORGAN INGLAND FZ LLC
Branch:	Dubai, UAE
Address:	RAKBANK, P.O. BOX 1531, Dubai, UAE
Account No./ IBAN	AE830400008332676924901
Type of Account.	

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

Department	Name	Designation	Email Id	Mobile Number
Finance	Mudassar Khan	Administration	admin@miatlantic.ae	+971 7 2075485
Procurement	Huzaiifa Shakeeb	Procurement	procurement@mitlantic.ae	+971 7 2075485
Management	Aaqib Javed	Country Head-Sales and	aaqib@miatlantic.ae	+971 7 2075485
Authorized Signatory	Aaqib Javed	Operations-EMEA Region	aaqib@miatlantic.ae	

#### A.3 Infinity Logistics Account Manager

Name:	Vishak
Contact Number:	
Email ID	

## B. CREDIT - TERMS & CONDITIONS

### B.1 Credit Facility Request

Credit Limit (AED) *	Payment Term (days)
10,000	30 days

<b>Credit Cycle*</b>	<b>Mode of Payment</b>
Per Invoice* <input type="checkbox"/>	Bank Transfer <input type="checkbox"/>
Monthly Cycle** <input type="checkbox"/>	Cheque <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	Designation	Email Id	Mobile Number
Job Approver				
Authorized signatory				

(\*) Fields are mandatory to be filled

### B.3 Payment References

<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.S 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 Signatory:

Designation:

SIGNATURE

Aaqib Javed

COMPANY STAMP



### Terms and Conditions

- All our invoices are presumed to be accurate unless we receive a written notification within 7 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)

Checked & Approved  
by Uishak

Sales

Approved by:

Date:

Finance

Approved by:

Date:

Management

Approved by:

Date: