

**ACCOUNT OPENING FORM**

Company Name: AMIT INTERNATIONAL GROUP
(First Party)
Address: Office 607, Maritime Business Center(MBC)
Dubai Maritime City, Dubai, UAE
P.O. Box: 1633

Contact Person: Ibrahim Naushad

Tel: +971 4011064

Email: ibrahim.naushad@amitintl.com

Mob: +971 50 531 6131

Payment Information

Invoice Frequency _____

Payment Terms 30 days Credit from the date of Delivery

Contact Person Amila Pradeep Rajapaksha/ Jobin Abraham

Dir. Tel +971 4011000

Email Id accounts@amitintl.com ; ibrahim.naushad@amitintl.com

Guarantee Chq Detail _____

VAT TRN 1004826770000003

Bank Reference

Bank Name RAKBANK

Account Number 0252359680001 **Type** _____



Terms and Conditions

- 1) All our invoices are presumed to be accurate unless we receive a written notification within seven days of receipt.
- 2) The account facility will be suspended without prior notice in the following situations: If the Invoice is not paid within the payment period stipulated above or as agreed upon.
- 3) 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

I, the undersigned acting on behalf of the First Party have read and understood the above-mentioned terms and conditions.

Name: Abdulaziz Abdulla

Designation: Group Managing Director Date: _____

Signature

Company Stamp



**Acceptance of Account Facility Request
To be completed by INFINITY LOGISTICS**

Account Number: _____

Issued Date: _____