

ACCOUNT OPENING FORM

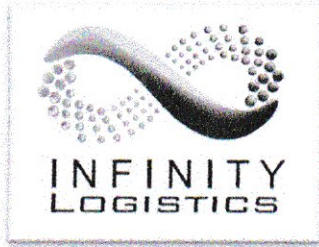
Company Name: DOEDIJNS MIDDLE EAST & AFRICA FZE
Address: G1-16, GATE#1, AJMAN
FREE ZONE
AJMAN- UAE.
Contact Person: DIANA CHARLES
MOB: 0566414942
Tel: admin.dubai@doedijns.com
Email: 065463667 / 065690639.
TEL:
Mob:

Payment Information

Invoice Frequency
Payment Terms 30 DAYS.
Contact Person MR SHAJAN.A.SITHIKE
Dir. Tel 0527778663
Email Id shajan.sithike@doedijns.com
Guarantee Chq Detail
VAT TRN 100346514100003

Bank Reference

Bank Name Commercial Bank of DUBAI.
Account Number 1002387858 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) In consideration of the Second Party granting an Account Facility to the First Party, the First Party hereby gives written consent to the Second Party to obtain a credit report concerning the First Party from any credit reporting agency, and further to make such enquiries and to receive and to give such information as is relevant to establishing the First Party's credit standing.
- 4) 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:

MR. SHAJAN A. SITHKE

Designation:

OPERATIONS MANAGER- MEA

Date:

1.6.21

Signature

Company Stamp



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

Account Number: _____

Issued Date: _____