



ACCOUNT OPENING FORM

Mob: 0509891531

Invoice Frequency _____

Guarantee Chq Detail _____

VAT TRN	100322569300003
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Account Number 1014523111701 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: RAMAKRISHNA KILLAMSETTY

Designation: Dy Manager Sales Coordination and Logistics Date: May 16, 2024

Signature

Company Stamp



Acceptance of Account Facility Request To be completed by INFINITY LOGISTICS

Account Number: _____ Issued Date: _____