

CREDIT APPLICATION FORM

A. CUSTOMER DETAILS

A.1 Details of the Organization

Name: Annicom International LLC		
Address: Showroom 6, Sheikh Ammar Bin Humaid Street, Al Rawda 3		
City / Emirate: Ajman, UAE		
Office Tel. # 06 779 7333	E-mail: jasper@annicomllc.ae	Web: http://www.annicom.com/

Bank Details *

Name:	Dubai Islamic Bank (DIB)
Branch:	Dubai
Address:	Sheikh Zayed Road Branch 2, Dubai, UAE
Account No. / IBAN	097524204677301 / AE130240097524204677301
Type of Account.	Reward Account

A.2 Key Personnel / Authorized Signatory / Management*

Department	Name in Full	Designation	Email Id and Mobile Number
Finance	Elsa Gonzales	Accounts Admin.	accounts@annicomllc.ae / 050 393 6670
Procurement	Jasper Daganio	Inventory Controller	jasper@annicomllc.ae / 055 307 1176
Management	Dennis Ubaldo Gates	Managing Director	
Authorized Signatory	Dennis Ubaldo Gates	Managing Director	sales@annicomllc.ae

B. CREDIT - TERMS & CONDITIONS

B.1 Credit Facility Request

Credit Limit (AED) *	Payment Term (days)
15000 AED	15 DAYS

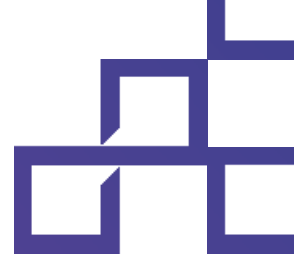
Credit Cycle*

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 1st 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	Jasper Daganio	Inventory Controller	jasper@annicomllc.ae / 055 307 1176
Job Approver	Jasper Daganio	Inventory Controller	jasper@annicomllc.ae / 055 307 1176
Cheque Signatory	Dennis Ubaldo Gates	Managing Director	

(*) 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

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

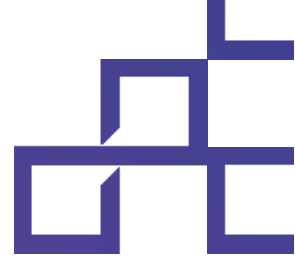
Name of Authorized Person: Dennis Ubaldo Gates

Designation in the Company: Managing Director

Signature



Company Stamp



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:** _____

