

## CREDIT APPLICATION FORM

### A. CUSTOMER DETAILS

#### A.1 Details of the Organization

Name: EMPIRE SARMAD SPORTS FIELDS AND HALLS EQUIPMENT TRADING LLC		
Address: OFFICE 1405, DAMAC SMART HEIGHTS, BARSHA HEIGHTS, PO BOX 65807		
City / Emirate: DUBAI		
Office Tel. # 045645848	E-mail: info@empiresarmad.ae	Web: www.empiresarmad.ae

#### Bank Details \*

Name:	MASHREQ BANK
Branch:	MUSSAFA
Address:	PO BOX 1250, DUBAI, UAE
Account No./ IBAN	AE390330000019100439688
Type of Account.	SME

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

Department	Name in Full	Designation	Email Id and Mobile Number
Finance	MARK RAYGAN PENANO	GEN. ACCOUNTANT	mark@empiresarmad.ae 0509120253
Procurement	ANALYN DE JESUS	SALES MANAGER	analyn@empiresarmad.ae 0504654581
Management			
Authorized Signatory			

### B. CREDIT - TERMS & CONDITIONS

#### B.1 Credit Facility Request

Credit Limit (AED) *	Payment Term (days)
AED 150,000	60 Days

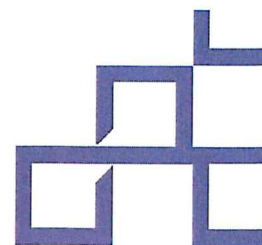
#### Credit Cycle\*

1. Per Invoice*	<input type="checkbox"/>
2. Monthly Cycle**	<input checked="" 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 in Full	Designation	Email Id and Mobile Number
Job Executor	ANALYN DE JESUS	SALES MANAGER	analyn@empiresarmad.ae
Job Approver	DAVID BAGDASARIAN	GEN. MANAGER	david@empiresarmad.ae
Cheque Signatory			

(\*) 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: TERRACO	043262699 DINCY PRAKASH
Credit Limit (AED): AED 150,000, 60 DAYS CREDIT	
2. Company Name	Contact Person and Number
Address: PREMIUM FLOORING	072689818 ALYSSA
Credit Limit (AED): AED 175,000, 90 DAYS CREDIT	

## 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: DAVID BAGDASARIAN

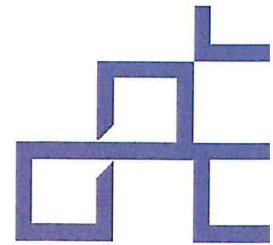
Designation in the Company: PARTNER/ GENERAL MANAGER

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:** \_\_\_\_\_