



ACCOUNT OPENING FORM

Company Name: GOODWILL MARINE EQUIP REPAIRING
Address: SHED #14, AL SANAJI BUILDING
POS AL KHOR IND AREA 2
AL DWEER, DUBAI
Contact Person: MR. KUMAR
Tel: 04-3334346
Email: gmer@emirates.net.ae
Mob: 050-5590852

Payment Information

Invoice Frequency _____
Payment Terms 30 days
Contact Person D. Nagarejan
Dir. Tel 04-334346
Email Id gmer@emirates.net.ae
Guarantee Chq Detail _____
VAT TRN 100370178400003

Bank Reference

Bank Name Emirates NBD
Account Number 101 1114777601 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.

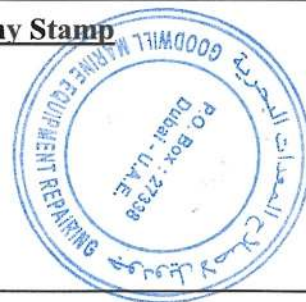
Name: D. NAGORAJAN

Designation: Partner Date: 21-07-2022

Signature

A handwritten signature in blue ink, appearing to read 'D. Nagorajan', is written within a rectangular box.

Company Stamp



Acceptance of Account Facility Request To be completed by INFINITY LOGISTICS

Account Number: _____ Issued Date: _____