



ACCOUNT OPENING FORM

Company Name: PLAYSMART FZC
Address: PO. BOX 52609
HAMRIYA FREE ZONE
SHARJAH UAE
Contact Person: MR. SANTHOSH K. RAGHARAN.
Tel: _____
Email: santhosh@playsmartme.com
Mob: +971 54 994 2198

Payment Information

Invoice Frequency: - -
Payment Terms: 30 days Credit from the date of Delivery
Contact Person: Mr. Mohammed Umar / Ms. Mary
Dir. Tel: 06 550 5575
Email Id: umar@playsmartme.com / mary@playsmartme.com
Guarantee Chq Detail: - -
VAT TRN: 100520070200003

Bank Reference

Bank Name: RAK BANK
Account Number: 0192528585001 Type: CURRENT



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. SANTHOSH

Designation:

Logistic Manager

Date:

12-09-2022

Signature

Company Stamp



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

Account Number: _____

Issued Date: _____