



ACCOUNT OPENING FORM

Company Name: KALTENBACH MIDDLE EAST FZC
Address: SAIF ZONE, P6-029, SHARJAH
UAE
P.O. BOX : 122696

Contact Person: MR. MOHAMED WEBER
Tel: 065574624
Email: w.weber@kaltenbach.ae
Mob: 055 44 63061

Payment Information

Invoice Frequency MONTHLY
Payment Terms 30 days Credit from the date of Delivery
Contact Person MS. LARNIE APOSTOL
Dir. Tel 052 4752312
Email Id finance@kaltenbach.ae
Guarantee Chq Detail _____
VAT TRN 100000804300003

Bank Reference

Bank Name EMIRATES NBD
Account Number 1015580594001 Type AED ACCOUNT



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. MOHAMED -WEBER

Designation: MANAGING DIRECTOR

Date: 22/09/2012

Signature

Company Stamp



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

Account Number: _____

Issued Date: _____