

CREDIT APPLICATION FORM

A. CUSTOMER DETAILS

A.1 Details of the Organization

Name:	MEDTRA FZE		
Address:	Corporate Facility - LV 47B, Hamraiyah Freezone Phase 2, P.O Box: 52857		
City / Emirate:	Sharjah.		
Office Tel. #	E-mail:	Web:	
+971 65466065	info@medtraworld.com.	www.medtraworld.com.	

Bank Details *

Name:	RAK BANK
Branch:	Umm Hurraik, Dubai.
Address:	Dubai
Account No./ IBAN	0333166558001
Type of Account.	Current Account

A.2 Key Personnel / Authorized Signatory / Management*

Department	Name in Full	Designation	Email Id and Mobile Number
Finance	Praveen Nair.	Senior Accountant	Praveen@medtraworld.com.
Procurement			accounts1@medtraworld.com.
Management			
Authorized Signatory	Fathima Safar	General Manager	Fathima@medtraworld.com

B. CREDIT - TERMS & CONDITIONS

B.1 Credit Facility Request

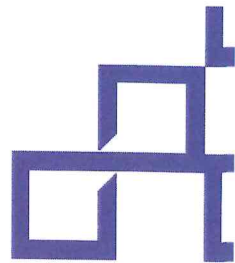
Credit Limit (AED) *	Payment Term (days)
500,000/-	60 days

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 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	Abhilash. Harikumar	Operations Coordinator	operations@medtraworld.com, 0543111070
Job Approver	NA		
Cheque Signatory	NA		

(*) 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:	MEDTRA FZE (Praveen) Corporate Facility - LV47B, Hamriyah Freezone Phase 2, PO Box: 52857
Credit Limit (AED):	500,000/-
2. Company Name	Contact Person and Number
Address:	
Credit Limit (AED):	

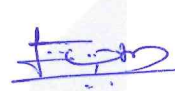
B.5 Customer Declaration

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.

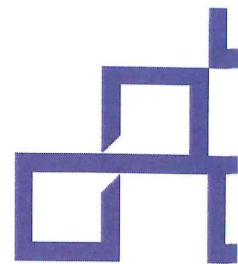
Name of Authorized Person: FATHIMA SAFAR, Designation in the Company: General Manager.

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:** _____