

**ENAGIC® (MALAYSIA) SDN BHD**

Registration No.: 201101042983

Direct Sales License No.: AJL931978

Unit 25-6 & 27-6, The Boulevard, Mid Valley City, Lingkaran Syed Putra, 59200, Kuala Lumpur

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www.enagic-my.com**DISTRIBUTOR INFORMATION CHANGE FORM**☐ **PERSONAL ACCOUNT TO COMPANY ACCOUNT**

ID NUMBER			
A. PRINCIPAL INFORMATION (PRESENT DISTRIBUTOR'S NAME).			
Full Name (as per IC/Passport):			
NRIC/Passport		Date of Birth:	
Tax Identification No.:			
Address:			
Postal Code:		City:	
Contact No (Home/Office):		(Mobile):	
Email Address:		Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
B. PRINCIPAL INFORMATION (NEW COMPANY'S NAME).			
Company Name (as per SSM):			
Business Reg:		Date of Birth:	
Tax Identification No.:			
SST Registration No.: <i>Mandatory for SST- registrant</i>			
Address:			
Postal Code:		City:	
Contact No (Home/Office):		(Mobile):	
Email Address:		Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
C. PRIMARY DIRECTOR'S NAME. **must be same with information in Section A**			
Full Name (as per IC/Passport):			
D. SUPPORTING DOCUMENTS.			
Please provide an updated version of each of the following copies:			
<input type="checkbox"/> Form 49			
<input type="checkbox"/> Form 9			
<input type="checkbox"/> Business Registration Certificate (SSM)			
<input type="checkbox"/> NRICs			
<input type="checkbox"/> Company Bank Account			
<input type="checkbox"/> Authorization Letter with company letterhead which consists of the statement of acknowledgement from all directors; accompanying with full name, signatures, company chop/stamp and date.			
E. PURPOSE OF THE CHANGES.			
Please state your reasons here:			
F. BANK ACCOUNT DETAILS.			
Account Holder Name:			
Name of the Bank:			
Account No.:			
G. REQUIREMENTS.			
The principal director's name in the company must be the current owner of the distributorship account.			
H. ADMINISTRATIVE FEE.			
Total:		MYR 200.00	

☐ **COMPANY ACCOUNT TO PERSONAL ACCOUNT**

ID NUMBER			
A. PRINCIPAL INFORMATION (PRESENT COMPANY'S NAME).			
Company Name (as per SSM):			
Business Reg:		Date of Birth:	
Tax Identification No.:			
SST Registration No.:	<i>Mandatory for SST- registrant</i>		
Address:			
Postal Code:		City:	
Contact No (Home/Office):		(Mobile):	
Email Address:		Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
B. PRINCIPAL INFORMATION (NEW DISTRIBUTOR'S NAME).			
Full Name (as per IC/Passport):			
NRIC/Passport		Date of Birth:	
Tax Identification No.:			
Address:			
Postal Code:		City:	
Contact No (Home/Office):		(Mobile):	
Email Address:		Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
C. SUPPORTING DOCUMENTS.			
Please provide an updated version of each of the following copies:			
<input type="checkbox"/> Form 49			
<input type="checkbox"/> Form 9			
<input type="checkbox"/> Business Registration Certificate (SSM)			
<input type="checkbox"/> NRICs			
<input type="checkbox"/> Company Bank Account			
<input type="checkbox"/> Authorization Letter with company letterhead which consists of the statement of acknowledgement from all directors; accompanying with full name, signatures, company chop/stamp and date.			
D. PURPOSE OF THE CHANGES.			
Please state your reasons here:			
E. BANK ACCOUNT DETAILS.			
Account Holder Name:			
Name of the Bank:			
Account No.:			
I. REQUIREMENTS.			
The new owner of the distributorship account must be the director's name in the company			
J. ADMINISTRATIVE FEE.			
Total:	MYR 200.00		

☐ **PERSONAL ACCOUNT TO PERSONAL ACCOUNT**

ID NUMBER			
A. <u>PRINCIPAL INFORMATION (PRESENT DISTRIBUTOR'S NAME).</u>			
Full Name (as per IC/Passport):			
NRIC/Passport		Date of Birth:	
Tax Identification No.:			
Address:			
Postal Code:		City:	
Contact No (Home/Office):		(Mobile):	
Email Address:		Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
B. <u>PRINCIPAL INFORMATION (NEW DISTRIBUTOR'S NAME).</u>			
Full Name (as per IC/Passport):			
NRIC/Passport		Date of Birth:	
Tax Identification No.:			
Address:			
Postal Code:		City:	
Contact No (Home/Office):		(Mobile):	
Email Address:		Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
C. <u>SUPPORTING DOCUMENTS.</u>			
Please provide an updated version of each of the following copies:			
<input type="checkbox"/> NRICs			
<input type="checkbox"/> Birth Certificates (changes among siblings and parents)			
<input type="checkbox"/> Marriage Certificate (changes among spouse)			
<input type="checkbox"/> Company Bank Account			
D. <u>PURPOSE OF THE CHANGES.</u>			
Please state your reasons here:			
E. <u>BANK ACCOUNT DETAILS.</u>			
Account Holder Name:			
Name of the Bank:			
Account No.:			
K. <u>REQUIREMENTS.</u>			
The change is only permitted among immediate family members; spouse, parents, and siblings.			
L. <u>ADMINISTRATIVE FEE.</u>			
Total:		MYR 50.00	

TERMS & CONDITIONS AND AGREEMENTS**A. TERMS & CONDITIONS.**

Distributors are advised to avoid frequent changes to their personal or business information. However, if a change is necessary, a valid and substantial reason must be provided. All such requests will be subject to management approval.

If the principal account undergoes a change in ownership, all associated accounts registered under the same name must also be updated to reflect the new ownership.

Enagic prohibits direct transitions between companies.

Please ensure that all information provided on this request form is accurate and complete. Failure to provide legible and correct information may result in the invalidation of this application.

The applicant is not permitted to assign the date of the requested change. Enagic (Malaysia) Sdn Bhd reserves the right to request an explanation from the applicant regarding the reason for the change request. Furthermore, Enagic (Malaysia) Sdn Bhd reserves the right to modify or establish its replacement policy at its sole discretion at any time.

The new account holder must review and acknowledge the terms outlined in the attached Policies and Procedures and provide their signature on the final page to confirm agreement.

The current account holder must be physically present at the office during the submission of the required documents. Enagic (Malaysia) Sdn Bhd will take two (2) business days to process the request.

In the event the current owner is unable to be physically present at the office, Enagic (Malaysia) Sdn Bhd reserves the right to implement additional procedural measures to verify the request. The verification process may take up to seven (7) working days to complete.

B. AGREEMENTS.

I certify that I have received a copy of and have read and understood the provisions of Enagic® (Malaysia) Sdn Bhd's Set of Policies; Distributor Policies & Procedures, Privacy Policy, Refund Policy, Collection Policy, Commission Policy and Delivery Policy and Distributor Handbook which is published on Enagic® (Malaysia) Sdn Bhd's website; www.enagic-my.com. I hereby agree to be bound by Enagic® (Malaysia) Sdn Bhd's Set of Policies (including any amendments thereto which shall be furnished to me from time to time).

I confirm that I am of full legal age and all my personal information and data ("Personal Data") stated above are complete and accurate. I hereby acknowledge that my personal information may be shared with Enagic® (Malaysia) Sdn Bhd's related and/or affiliated company within Malaysia or outside Malaysia for the purposes of performing this agreement.

Furthermore, I hereby agree that my personal data shall be processed, stored, used and disclosed in accordance with the Enagic® (Malaysia) Sdn Bhd's Privacy Policy.

☐ Agree

☐ Disagree

I am aware that Enagic® (Malaysia) Sdn Bhd has the right to reject any application whereby is incomplete and/or falsification of signature and/or initial has occurred during the submission of this product application form.

NAME OF THE CURRENT OWNER:
NAME OF THE NEW OWNER:
SIGNATURE & DATE:
SIGNATURE & DATE: