ALL APPLICATION MUST BE SUBMITTED TO

ENAGIC® (MALAYSIA) SDN BHDgoc.mys@enagic.comRegistration No.: 201101042983CC to ukon@enagic-my.comDirect Sales License No.: AJL931978Unit 25-6 & 27-6, The Boulevard, Mid Valley City, Lingkaran Syed Putra, 59200, Kuala Lumpur

Tel: (+60)3-2282 2332 Fax: (+60)3- 2282 2335 www.enagic-my.com | https://shop.enagic-my.com/

UKON™	USER	NRIC/PASSPORT/	BUSINESS REGISTRATION NU	IMBER		
APPLICATION FORM			BUSINESS REGISTRATION N		TER KIT: MYR 50 00	
				oniben d on a		
TYPE OF ORDER	ID NUMBER					
□ NEW □ REPEAT						
FOR OFFICE USE ONLY	RECEIVED BY:		APPLICAT	ION DATE:		
A. PRINCIPAL INFORMATION.						
Full Name (as per IC/Passport):						
Company Name (as per SSM):						
NRIC/Passport/Business Reg:			Date of Birth:			
Tax Identification No.:			SST Registration No.:			
Address:				1		
Postal Code:			City:			
Phone No (Home/Office):			(Mobile):			
Email Address:			Gender:	□Male	Female	
B. PRINCIPAL BANK INFORMAT	<u>FION.</u>		*FILL OUT IF APPL	ICANT REGIST	ER AS DISTRIBUTOR	
Account Holder Name:						
Name of the Bank:			Account No.:			
C. SPONSOR'S INFORMATION.	_	**Not applicat	ole for Ukon Sigma Softgels	purchases belo	w than 10 boxes**	
Full Name (as per IC/Passport):						
ID No:			Contact No:			
Register the Applicant as your:	()A					
D. ENROLLER'S INFORMATION	<u>.</u>					
Full Name (as per IC/Passport):						
ID No:			Contact No:			
E. <u>PRODUCTS</u> .						
□ KANGEN UKON SIGMA S	OFTGELS		PRICE: MYR 368.00			
Contains of 1 Box (100 Softgel	s) Fish Source		T RICE. WITK 300.00			
QUANTITY PURCHASED:		Boxes	Total MYR :			
	SOAP					
SET DD (2 boxes 32 Bars)			PRICE: MYR 3,680.00			
SET SIGMA (6 boxes 96 Bars)			PRICE: MYR 9,980.00			
	IGEN UKON SIGMA	SOFTGELS & KA	NGEN UKON & HONEY	SOAP		
□ SET DD [5 boxes of UKON PP & 1 box (16 Bars) of Honey Soap]			PRICE: MYR 3,680.00			
SET SIGMA [15 boxes of UKON PP & 3 boxes (48 Bars) of Honey Soap]			PRICE: MYR 9,980.00			
F. <u>SHIPPING DETAILS</u> .						
PENINSULAR MALAYSIA						
🗆 EAST MALAYSIA						
G. UKON™ TO BE DELIVERED TO (SHIPPING RECIPIENT):						
Same address as above	🗆 YES 🗆 NO (you are	required to fill up	the below)			
Full Name (as per IC/Passport):						
Company Name (as per SSM):						

NRIC/Passport/Business Reg:								
Tax Identification No.:			SST Registration No.:					
Address:								
Postal Code:			City:					
Contact No:			Email Address:					
H. PAYMENT TYPE You can alw	vays check the li	st of available payment m	ethods at https://bit.ly/met	hodenamy.				
CREDIT CARD	Single Payment		🗆 Visa 🛛 Master					
CHEQUE/ REMITTANCE	PBB: 3-1777-8621-4 HLB: 223-00000-162							
 Single payment can be done at Senang Pay at https://bit.ly/senangpay1 								
PAYMENT METHODS. – SINGLE PAYMENT & INSTALLMENT PLAN								
The installment scheme is app			gen Ukon Sigma Softgels & H	oney Soap DD SET only				
	□ Visa	□ Master	Credit Card Number:					
Single Payment								
□ Instalment								
Please select your bank:			Credit Card Expiry Date:	(MM/YY)				
Tenure:			Card Holder Signature:					
J. PAYMENT METHODS SIN	GLE PAYMENT &	INSTALLMENT PLAN						
The installment scheme is applicable for a minimum of 30 boxes of Kangen Ukon Sigma Softgels & Honey Soap Sigma SET only								
		□ Master	Credit Card Number:					
Single Payment								
Instalment								
Please select your bank:			Credit Card Expiry Date:	(MM/YY)				
Tenure:			Card Holder Signature:					
K. TERMS AND CONDITIONS.								
1. Copy of credit card (front side	only) must be su	bmitted for MOTO payme	nt method.					
 Copy of credit card (front side only) must be submitted for MOTO payment method. A minimum Penalty Fee of RM159 per case onto the request for Cancellation and Amendment for each transaction 								
2. A minimum Penalty Fee of Rivi	159 per case on	the request for Cancella	tion and Amendment for eac	n transaction				
L. RECURRING PAYMENT OPT	· ·	· ·		n transaction				
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