



ENAGIC® (MALAYSIA) SDN BHD

Company No.: 971103-W

Direct Sales License No.: AJL931978

Unit 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

MACHINE REPAIR FORM

ID NUMBER

FOR OFFICE USE ONLY	RECEIVED BY:		APPLICATION DATE:	
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A. PRINCIPAL INFORMATION.

Applicant's Name:			
NRIC or Company No:		Date of Birth:	
Phone No (Home/Office):		(Mobile):	
Email Address:			

MACHINE DETAILS.

Machine:	
Serial Number:	

B. ISSUES & SERVICE PERFORMED.

Description of problems:	
Service Performed:	
Remarks:	

C. PARTS USED & MISC.

****All prices are zero-rated of GST****

PART NUMBER	QUANTITY	DESCRIPTION	PRICE	AMOUNT
TYPE OF WATER	TAP WATER	pH	TOTAL PARTS	
Strong Kangen 11.0			Tax	
Kangen Water 9.5			Labor & Cleanning	
Beauty Water 5.5			Shipping Fee	
Strong Acidic 2.5			TOTAL AMOUNT	

D. SERVICE DEPARTMENT.			
Name:		Service Date:	
E. MACHINE TO BE DELIVERED TO:		F. MACHINE TO BE COLLECTED BY:	
Name:			
NRIC or Company No:			
Contact No.:			
Date:			
Address of delivery:			
Tracking Number:		<input type="checkbox"/> GDEX:	<input type="checkbox"/> ABX:
G. TOTAL PAYMENT. **All prices are zero-rated of GST**			
TOTAL AMOUNT	MYR		
SHIPPING FEE	MYR	**if necessary**	
TOTAL	MYR		
H. PAYMENT METHODS. – SINGLE PAYMENT ONLY			
<input type="checkbox"/> CREDIT CARD	Swipe in the office	<input type="checkbox"/> Visa	<input type="checkbox"/> Master
<input type="checkbox"/> CHEQUE/ REMITTANCE	PBB: 3-1777-8621-4	HLB: 223-00000-162	
		<input type="checkbox"/> SINGLE PAYMENT	
<input type="checkbox"/> MOTO <i>*Commission may be vary from cheque/ remittance/ credit card swipe in the office. Please refer commission chart.</i>	Mail Order	<input type="checkbox"/> Visa	<input type="checkbox"/> Master
	Credit Card Number:		
	Credit Card Expiry Date	(MM/YY)	
	Cardholder's Signature:		
I. TERMS AND CONDITIONS.			
1. Copy of credit card (front side only) must be submitted for MOTO payment method.			
2. A minimum Penalty Fee of MYR 150.00 per case (zero-rated of GST) onto the request for Cancellation and Amendment for each transaction.			
J. ALTERNATE PAYER SECTION (if required).			
The Payer (Name).....bearing the NRIC/Passport No:..... paying total of MYR.....for The Applicant (Name).....			
ALTERNATE PAYER'S SIGNATURE:			
K. AGREEMENT.			
<p>I hereby verified that 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.</p> <p>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.</p> <p>I hereby acknowledge that Enagic® (Malaysia) Sdn Bhd's technicians reserves the rights to conduct deep cleaning without my permission should upon inspection, the machine is unable to work properly due to calcium build up. Such service is not covered under the warranty. Distributors are to TAKE NOTE that there are items that are not covered by the warranty (refer to 'WARRANTY CARD' and 'MACHINE REPAIR INSTRUCTION') for more information.</p> <p>Should in any event that distributors require Loaner Machine, he/she is required to fill up the Loaner Machine Request Form.</p>			
APPLICANT'S SIGNATURE:		DATE:	