

RESELLER APPLICATION FORM**PLEASE ATTACH THE FOLLOWING DOCUMENTS:**

For Limited Company :

- A) FORM 9 D) Latest 3 Months Bank Statement
B) FORM 24
C) FORM 49

For Sole Proprietor / Partnership Business:

- A) Business Registration Form (Borang D /B)
B) Maklumat Perniagaan
C) Latest 3 Months Bank Statement

A1.GENERAL INFORMATION			
COMPANY NAME (in full) :			BUSINESS REGISTRATION NO :
DATE INCORPORATED :	YEAR(S) IN BUSINESS :	TYPE :	
<small>(SOLE PROPRIETOR / PARTNERSHIP / CORPORATION)</small>			
NATURE OF BUSINESS	BUSINESS STRUCTURE		
<small>(Sub-d, Si Reseller, Retailer, Government)</small>			
ADDRESS :			POSTCODE :
TEL :	FAX :	EMAIL 1 :	EMAIL 2 :

(Invoices Will Be Sent Via Email To The Above E-mail Addresses)

B1.OWNER / PARTNER DETAIL			
NAME (in full) :		NAME (in full) :	
HOME ADDRESS :		HOME ADDRESS :	
I/C NO :	H/P NO :	I/C NO :	H/P NO :
NAME (in full) :		NAME (in full) :	
HOME ADDRESS :		HOME ADDRESS :	
I/C NO :	H/P NO :	I/C NO :	H/P NO :

C1.BANKING INFORMATION			
BANK NAME 1:		BRANCH	
CURRENT A/C NO:		BANK FACILITIES	
BANK NAME 2:		BRANCH	
CURRENT A/C NO:		BANK FACILITIES	

APPLY ONLINE STORE ORDER http://www.ayujayamas.com	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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Email1 is your login ID, Temporary password will sent to you Email1

DECLARATION	
I hereby declared that the information given herein and documents attached are valid and true to the best of my knowledge.	
Name : _____	Date : _____
Designation : _____	
Signature : _____	Company Stamp : _____