



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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ALL APPLICATION MUST BE SUBMITTED TO

[goc.mys@enagic.co.jp](mailto:goc.mys@enagic.co.jp)

CC to [area4@enagic-my.com](mailto:area4@enagic-my.com)

[www.enagic-my.com](http://www.enagic-my.com)

**PRODUCT APPLICATION FORM**  
**[BRUNEI]**

|                                      |   |
|--------------------------------------|---|
| <input type="checkbox"/> USER        | NRIC & MEMBER FEE: MYR 50.00 **STARTER KIT INCLUDED** |
| <input type="checkbox"/> DISTRIBUTOR |   |
| <b>ID NUMBER</b>                     |   |

|                            |                     |                          |
|----------------------------|---------------------|--------------------------|
| <b>FOR OFFICE USE ONLY</b> | <b>RECEIVED BY:</b> | <b>APPLICATION DATE:</b> |
|----------------------------|---------------------|--------------------------|

|   |   |   |  |
|---|---|---|--|
| <b>A. PRINCIPAL INFORMATION.</b>  |   |   |  |
| <b>*Applicant's Name:</b>   |   |   |  |
| <b>*Passport or Company No:</b>   |   | <b>*Date of Birth:</b>  |  |
| <b>*Address:</b>  |   |   |  |
| <b>*Postal Code:</b>  |   | <b>*City &amp; Country:</b>   |  |
| <b>Phone No (Home/Office):</b>  |   | <b>*(Mobile):</b>   |  |
| <b>Email Address:</b>   |   | <b>*Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female |  |
| <b>B. PRINCIPAL BANK INFORMATION. – (BRUNEI BANK INFO ONLY) **FILL OUT IF APPLICANT REGISTER AS DISTRIBUTOR**</b> |   |   |  |
| <b>Account Holder Name:</b>   |   |   |  |
| <b>Name of the Bank:</b>  |   |   |  |
| <b>Address of the Bank:</b>   |   |   |  |
| <b>Postal Code:</b>   |   | <b>City &amp; Country:</b>  |  |
| <b>Account No.:</b>   |   | <b>IBAN:</b>  |  |
| <b>Passport No.:</b>  |   | <b>SWIFT:</b>   |  |
| <b>Company Registration No.:</b>  |   | <b>Income Tax No.:</b>  |  |
| <b>C. ENROLLER &amp; SPONSOR'S INFORMATION.</b>   |   |   |  |
| <b>Enroller's Name:</b>   |   |   |  |
| <b>Enroller's ID No:</b>  |   | <b>Enroller's Contact No:</b>   |  |
| <b>Sponsor's Name:</b>  |   | <input type="checkbox"/> Same as Above  |  |
| <b>Sponsor's ID No:</b>   |   | <b>Sponsor's Contact No:</b>  |  |
| <b>Register the Applicant as your:</b> ( ) A  |   |   |  |
| <b>D. PRODUCTS (MACHINES).</b> <b>**All prices are zero-rated of GST**</b>  |   |   |  |
| <b>CATEGORY</b>   | <b>SERIAL NUMBER</b>  | <b>PRICE</b>  |  |
| <input type="checkbox"/> K8   |   | MYR 18,980.00   |  |
| <input type="checkbox"/> ANESPA DX  |   | MYR 9,000.00  |  |
| <input type="checkbox"/> JRIV   |   | MYR 13,000.00   |  |
| <input type="checkbox"/> SD501  |   | MYR 13,980.00   |  |
| <input type="checkbox"/> SD501 PT   |   | MYR 15,380.00   |  |
| <input type="checkbox"/> SUPER501   |   | MYR 18,800.00   |  |
| <b>E. SHIPPING DETAILS.</b> <b>**All prices are zero-rated of GST**</b>   |   |   |  |
| <b>MACHINE &amp; COURIER</b>  | <b>COURIER (DHL) **INSURANCE INCLUDED**</b>   |   |  |
| K8  | MYR 816.00  |   |  |
| ANESPA DX   | MYR 636.00  |   |  |
| JRIV  | MYR 684.00  |   |  |
| SD501   | <b>Delivery option is not applicable.</b><br>All customers must either made a self-collection in Enagic Malaysia office<br>or arrange their own courier provider. |   |  |
| SD501 PT  |   |   |  |
| SUPER 501   |   |   |  |

|  |   |   |                                 |
|--|---|---|---------------------------------|
| <b>F. MACHINE TO BE DELIVERED TO:</b>  |   | <b>**Delivery within Brunei region only**</b>                   |                                 |
| Recipient:   |   | Contact No.:  |                                 |
| Address:   |   |   |                                 |
| Postal Code:   |   | City & Country  |                                 |
| <b>G. PAYMENT METHODS. – SINGLE PAYMENT ONLY</b>   |   |   |                                 |
| <input type="checkbox"/> CREDIT CARD   | Swipe in the office   | <input type="checkbox"/> Visa                                   | <input type="checkbox"/> Master |
| <input type="checkbox"/> REMITTANCE  | PBB: 3-1777-8621-4  | Swift code:   | PBBEMYKL                        |
| <input type="checkbox"/> PAY DOLLAR  | Kindly notify Customer Service Personnel for Pay Dollar link. |   |                                 |
| <b>H. PAYMENT METHODS. – SINGLE PAYMENT ONLY</b>   |   |   |                                 |
| <input type="checkbox"/> MOTO<br><i>*Commission may be varied from remittance/ credit card swipe in the office.<br/>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:                                       |   |                                 |
| <b>I. TERMS AND CONDITIONS.</b>  |   |   |                                 |
| 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.  |   |   |                                 |
| <b>J. TOTAL PAYMENT.</b>   |   | <b>**All prices are zero-rated of GST**</b>                     |                                 |
| UNIT PRICE   | MYR   |   |                                 |
| SHIPPING FEE   | MYR   |   |                                 |
| MEMBER FEE   | MYR   |   |                                 |
| TOTAL  | MYR   |   |                                 |
| <b>K. ALTERNATE PAYER SECTION (if required).</b>   |   |   |                                 |
| The Payer (Name) _____   |   | bearing the NRIC/Passport No. _____                             |                                 |
| No. _____  |   | paying total of MYR _____ for The Applicant                     |                                 |
| (Name) _____   |   | ALTERNATE PAYER'S SIGNATURE: _____                              |                                 |
| <b>L. AGREEMENTS.</b>  |   |   |                                 |
| <p>I certify that I have received a copy of and have read and understood the provisions of Enagic® (Malaysia) Sdn Bhd's <b>Set of Policies (BRUNEI); Distributor Policies &amp; Procedures, Privacy Policy, Refund Policy, Collection Policy, Commission Policy and Delivery Policy and Distributor Handbook</b> which is published on Enagic® (Malaysia) Sdn Bhd's website; <a href="http://www.enagic-my.com">www.enagic-my.com</a> . 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).</p> <p>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.</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> |   |   |                                 |
| <input type="checkbox"/> Agree   |   | <input type="checkbox"/> Disagree                               |                                 |
| <p>I hereby acknowledge to receive a unit of <b>pH Level Test Kit (Liquid Form) – Phenolphthalein</b> for the purpose of testing the pH value of the water after installation has been completed.</p> <p>I hereby further acknowledge that I understand my ten (10) working days right of cancellation during the ten (10) working days cooling off period and</p>   |   |   |                                 |
| <p><input type="checkbox"/> I hereby request Enagic® (Malaysia) Sdn Bhd to release/deliver the machine before the expiry of the cooling off period and by doing so, I hereby waive my rights to cancel the contract during the ten (10) working days cooling off period.</p> <p><input type="checkbox"/> I wish to maintain my rights to be able to cancel the contract during the ten (10) working days cooling off period. <b>**The Applicant is required to fill up 'Kontrak Jualan Langsung/Pesanan Pelanggan' (Direct Sales Contract/Customer Order). **</b></p>  |   |   |                                 |
| I acknowledge to have been informed in regards to the following by the seller prior agreeing to enter into the agreement:  |   |   |                                 |
| <input type="checkbox"/> Monthly E- Cleaning – Once a month (requires E-Cleaner Powder & CPU)  |   | <input type="checkbox"/> Deep Cleaning – Once a year            |                                 |
| **Monthly E-Cleaning and Deep Cleaning are not applicable for ANESPA DX machine**  |   |   |                                 |
| <input type="checkbox"/> Replacement Filters   |   | <input type="checkbox"/> Coverage under Warranty                |                                 |
| <input type="checkbox"/> Machine Operation Guidelines – (How to operate the machine)   |   | <input type="checkbox"/> Marketing Plan (for distributors only) |                                 |
| <input type="checkbox"/> Solution to produce Strong Acidic (pH 2.5) & Strong Kangen (11.5) – Based on Usage Rate (requires Electrolysis Enhancer)  |   |   |                                 |
| <b>APPLICANT'S SIGNATURE:</b>  |   | <b>SPONSOR'S SIGNATURE:</b>                                     |                                 |
| <b>DATE:</b>   |   | <b>DATE:</b>  |                                 |