



**DUNCO SENDIRIAN BERHAD** (CO. REF : 133493-K)

**Address :** Mile 5.5, Jalan Tuaran, Wisma Kenatex 88400 Kota Kinabalu, Sabah.  
P.O. Box 12722, 88830 Kota Kinabalu Sabah.  
**Tel :** 088 420887 **Fax :** 088 433000 **Email :** mail@ dunco.com.my  
**Our Website :** www.dunco.com.my **Our Portal :** www.wiser.com.my

## DEALER APPLICATION FORM

( ALL information provided for in this application form will remain strictly confidential )

<b>A</b>	<b>Name:</b>			
	<b>Business Address:</b>		<b>Telephone:</b>	
			<b>Fax:</b>	
	<b>Registered Address:</b>		<b>Telephone:</b>	
			<b>Fax:</b>	
	<b>Type of Business:</b> Limited Company/Partnership/Sole Proprietorship		<b>Date of Incorporation:</b>	
	<b>Capital:</b>	<b>Authorized RM:</b>	<b>Paid Up RM:</b>	
	<b>Nature of Business:</b>			
<b>Business Registration No.</b>		<b>Trading License No.:</b> <b>Valid Until:</b>		
<b>Particulars of Shareholders / Partners / Proprietor</b>				
<b>B</b>	<b>Name</b>	<b>Designation</b>	<b>I/C No.</b>	<b>Address</b>
	1)			
	2)			
	3)			
<b>Particulars of Bankers</b>				
<b>C</b>	<b>Name</b>	<b>Place/Address</b>	<b>Account No.</b>	
	1)			
	2)			
	3)			
<b>Business Dealing With Other Company</b>				
<b>D</b>	<b>Name</b>	<b>Period of Dealing</b>	<b>Credit Limit</b>	
	1)			
	2)			

Particulars For This Application				
E	Type of goods	Anticipated monthly off-take	Credit Amount Required	Amount Approved
		RM	RM	RM
		RM	RM	RM
		RM	RM	RM
	<b>Total:</b>	RM	RM	RM
F	<b>Term Of Business</b> 1) Credit period for type of goods required is thirty (30) days. 2) The account should be operated within the credit limit applied for. 3) Interest at the rate of 2% per month will be levied on all overdue accounts if payment is not received within the agreed specified period.			
G	<b>Undertaking by Application</b> 1) I/We hereby confirm that the information contained in this application is true, I/We hereby undertake to provide additional information / documents if so required. 2) I/We hereby agreed to adhere strictly to the terms of business as indicated above and undertake to pay the accounts due within the specified period. 3) I/We acknowledge that your company reserves the right not to deliver goods, if I/We default on the agreed terms of business referred in (F) above. 4) I/We hereby authorize your company to obtain Bankers reference in respect of the Conduct of my/our following bank account :-  Bank : _____ Bank : _____ Address : _____ Address : _____  Account No. _____  <b>( N.B. : Latest Trading License must accompany this application )</b>			

Company Chop \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

Designation : \_\_\_\_\_

Date : \_\_\_\_\_

**Please Tick Your Enclosure**

Trading License	( )
Form 49 & 24 (applicable to Ltd. Co.)	( )
Personal Guarantee Letter	( )
Certificate of Business / Company Register	( )
Audited Account (Latest)	( )
<b>Banker Report/ Statement</b>	( )