



MERCHANT ACKNOWLEDGEMENT FORM

MERCHANT DETAILS

Company Name: _____

HQ Address: _____

Tel No: _____

Fax No: _____

Mobile No: _____

Email Address: _____

Website: _____

Nature of Business: _____

No of Outlets: _____

Additional Info: _____

SUBMISSION

Merchant Acknowledgement:		Submitted By:		Approved By:	
_____		_____		_____	
Chop & Sign		Chop & Sign		Chop & Sign	
Name:	_____	Name:	_____	Name:	_____
Date:	_____	Date:	_____	Date:	_____
		AMC Code:	_____	ASC Location:	_____

For Official Use