



Merchant UT/UR ID :  
**M** **Y**

## MERCHANT APPLICATION FORM

### A) COMPANY INFORMATION

Company name : \_\_\_\_\_  
 Company No. : \_\_\_\_\_  
 Doing business as (DBA) : \_\_\_\_\_  
 Business address : \_\_\_\_\_  
 \_\_\_\_\_  
 Postcode :   
 State : \_\_\_\_\_  
 HQ address (if any) : \_\_\_\_\_  
 \_\_\_\_\_  
 Postcode :   
 State : \_\_\_\_\_  
 Tel number :  -   
 Fax number :  -   
 Mobile phone number :  -   
 (for receiving sms)  
 E-mail : \_\_\_\_\_  
 Contact Person : \_\_\_\_\_  
 (authorised person)  
 Designation : \_\_\_\_\_

### B) PARTICULARS OF DIRECTOR(S)

Name : i) \_\_\_\_\_  
 NRIC no :  -  -   
 Name : ii) \_\_\_\_\_  
 NRIC no :  -  -   
 Name : iii) \_\_\_\_\_  
 NRIC no :  -  -

### C) BUSINESS INFORMATION

Nature of business : \_\_\_\_\_  
 Type of products / service offered : \_\_\_\_\_  
 Monthly sales turnover : RM \_\_\_\_\_  
 Average ticket size : RM \_\_\_\_\_  
 Business hours : \_\_\_\_\_ am to \_\_\_\_\_ pm  
 Number of outlets to participate in this program : \_\_\_\_\_  
 (please attach Branch Listing Acceptance Form (BLAF) if more than 1 outlet )  
 Have you joined other loyalty programmes before : Yes  No   
 If yes, please specify : \_\_\_\_\_

### D) MERCHANT CODE & REBATE RATE

Rebate code 1 : % for \_\_\_\_\_  
 Rebate code 2 : % for \_\_\_\_\_  
 SMS Name Display :   
 (maximum 11 characters)

### E) POS TERMINAL REQUIRED

No. of units required :   
 Telephone number : (direct line)  -   
 MID : \_\_\_\_\_  
 TID : \_\_\_\_\_

### F) BANKER INFORMATIONS

Bank Name : \_\_\_\_\_  
 Bank A/C No : \_\_\_\_\_  
 A/C Beneficiary Name : \_\_\_\_\_

### G) DOCUMENTATION REQUIRED

<b>Sole-Proprietor/Partnership :</b>	<b>For Sdn Bhd :</b>
<input type="checkbox"/> SSM Registration	<input type="checkbox"/> Form 24 & Form 49
<input type="checkbox"/> Photocopy of NIRC	<input type="checkbox"/> Form 9 or Form 13
<input type="checkbox"/> Bank Statement (latest 1 month)	<input type="checkbox"/> Bank Statement (latest 1 month)
<input type="checkbox"/> Business Card	<input type="checkbox"/> Business Card

### H) MODE OF PAYMENT

Cash / Cheque : RM \_\_\_\_\_  
 Credit Card : RM \_\_\_\_\_  
 Others : RM \_\_\_\_\_  
 TOTAL : RM \_\_\_\_\_

If by cheque : Bank Name \_\_\_\_\_  
 Cheque No. \_\_\_\_\_

If by credit card : Card No. \_\_\_\_\_

### I) DECLARATION

I hereby declare that all informations furnished herein is true and complete to my knowledge, and I further acknowledge and confirm that I have carefully read the provisions of the Merchant Agreement enclosed herewith. I hereby irrevocably and unconditionally agree to observe, and comply wit the provisions of the Merchant Agreement.

\_\_\_\_\_  
 AUTHORISED SIGNATORY

NAME : \_\_\_\_\_  
 I/C NO. : \_\_\_\_\_

\_\_\_\_\_  
 COMPANY CHOP

DATE : \_\_\_\_\_

### J) AUTHORISED SERVICE CENTRE (ASC) INFORMATION

Location : \_\_\_\_\_ State : \_\_\_\_\_  
 ASC UR ID : **M****Y****A****S****C** -   
 AMC UR ID : **M****Y****A****M****C** -   
 AMC Name : \_\_\_\_\_

### FOR OFFICE USE ONLY

Checked by ASC	Checked by UR Office	Approved by
Initial & Date	Initial & Date	Designation