

TBS DIGITAL PRINT SDN BHD

Reg 818399V
GST Reg 001908244480

Kalamazoo Printing Services

Reg SAO108969-U
GST Reg 416317440

APPLICATION FOR CREDIT FACILITIES FOR SUPPLIES AND SERVICES

I/We hereby apply for credit facility as follows:

Date of Application: _____

Name of company (in full) : _____
Business Address : _____
: _____
Business Registration No : _____
Date of incorporation : _____
Date of Commencement of Business : _____
Nature of Business : _____
Legal Institution : Sole Proprietorship / Partnership / Private Ltd Co / Public Co Ltd

For Limited Companies

Name Of Directors

IC No.

Address

<u>Name Of Directors</u>	<u>IC No.</u>	<u>Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Authorised Capital: _____

Paid up Capital: _____

For Partnership, Sole Proprietor

Name of partner

IC No.

Address

<u>Name of partner</u>	<u>IC No.</u>	<u>Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Amount of Credit Applied : RM _____ (words) Ringgit

CREDIT TERMS: 30 Days As agreed

GST Registration No. _____

ORDER DATA

Please indicate Types of **Products** required :

Types of **Services** required :

Purchasing Dept

Contact Name	
Contact No. / Ext.	

Accounts Dept

Contact Name	
Contact No. / Ext.	

CLIENTS UNDERTAKING

In consideration of the credit requested, I /we
the Directors / Partners of
hereby authorise and acknowledge the opening of a credit account on behalf of our Company. I/we, the directors, jointly and severally agree to indemnify TBS Digital Print Sdn Bhd/Kalamazoo Printing Services for any sums owing and outstanding by our Company for all supplies and services rendered to our company, at our request whether written or verbal during the operation of this account. We also agree to indemnify all legal costs involved leading to the recovery of any sums due and owing to TBS Digital Print Sdn Bhd and Kalamazoo Printing Services, its successors or assigns for said supplies and services rendered to our company at our request

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Company Authorised Signatory
Name:
Designation:
IC No:

.....
Company Authorised Signatory
Name:
Designation:
IC No:

For Internal use only:

The following documents have been received and verified

M & A Form 24 Form 49

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Approved By Verified By CREDIT LIMIT APPROVED RM

FOR PROCESSING KINDLY FAX TO 03-56343112 AND MAIL TO 88 , JALAN S 15/4, SUBANG JAYA, 47500 SELANGOR

Applied By Name & Designation on Behalf of Company

Company Stamp