## **Application Form**

## 20250703

All application form must be submitted to goc.sg@enagic.com and cc cs1@enagicsg.com

6		
	<b>L</b> o	)
En	agi	(

## **ENAGIC SINGAPORE PTE LTD**

	111 North Bridge Road, #25-04 Peninsula Plaza Singapore 179098  Tel: (65) 6720-7501 Fax: (65) 6720-7505 www.enagic.com.sg			ID:			
Company's Registration Number: 201135560M				Date:			
Applicant Informati							
Applicant/Company	Name:				Gender: ☐Male ☐Female		
Address:				Postal Co	ode:		
Date of Birth:	Teleph	one:		Email (Compulsor	y):		
NRIC No.:		Status:		or (ID & B	ank Details REQUIR	ED)	
Enroller Information		(=\\=0\\	-\				
	NT BUILDING PROGRA	•	₹)				
will receive commi status will not be	n, the special point stati ission based on his/her influenced by this sales	current distribu	utor status (S	P, D1, D0, FA0)	. The direct sponsor	ngen Air)	
Sponsor Information       Name:     Sponsor ID:					REGISTER APPLICANT AS YOUR		
Payment Information	n (Fnagic Singanore Pte	I td will only prod	sess the form o	ince nayment or	the initial payment has been paid		
Item:	The Chagic Singapore i te	Ltd Will Offig proc	Jess the form t	nice payment or	Serial Number:	<u>/                                      </u>	
□Leveluk SD501	□Leveluk Jr IV □S	D501 Platinum	□Super 501	□Anespa DX			
□Leveluk SD-DX	□Leveluk K-8 □Em	guarde 🛮 Uko	n DD A/B/C	□Ukon Sigma			
Full Payment	Enagic Payment						
□Single	□6 month □12	month □24	l month				
☐Split	Initial Payment: *Only fill this section if you opt for E-payment*						
	<u>:                                    </u>						
	++		+		=		
Unit Price	GST	Starter	kit	Handling Fees	Total		
Note: We DO NOT ACCEPT ANY third party payment without the alternate payer form!							
Payment Method:	□FavePay □Online	Payment □C	redit Card 🏻 🖺	DBS Bank Tra	ansfer (A/C:003-917499-3)	□NETS	
Remark:							
D   N   / O	*Kindly indicate full pa	yment/ how many	month's installr	ment on the remar	k*		
Bank Name / Check	k Number:						
For Distributor Onl	v: Bank Information						
Bank Name/Code:		Account Holder's	s Name:				
Branch Name/Code	):	Account Number	r:				
Acknowledgement							
	mation furnished in this applic				Il documents submitted in support of the ision is final.	<u>nis</u>	
I certify that I have been	n furnished and have read, unde	erstand and agree to	the provisions EN	AGIC SINGAPORE F	PTE LTD POLICIES		
	NLY FOR DISTRIBUTOR) which		•				
•	E PTE LTD to me after this dat				ts forth the		
Applicant Signature	nditions of this Policies and Pro : Sponsor/	Enroller Signat			Signature		
.,	350110017			23	5		