



<http://www.b-natural.com.my>
<mailto:info@b-natural.com.my>

B-NATURAL

Lot 1-A8, Level 1
Central Shopping Plaza
Jalan Banjaran Kepayan Ridge
88200 Kota Kinabalu, Sabah, Malaysia
Tel/Fax: +6 088-219395, HP: +6 0168310798.

Distributor/Reseller APPLICATION FORM

DATE:

COMPANY/NAME: _____

TRADING NAME: _____

ADDRESS: _____

SUBURB: _____ STATE: _____ POST CODE: _____

DIRECTOR(S): _____

EMAIL ADDRESS: _____

PREFERED EMAIL ADDRESS: _____@b-natural.com.my

TELEPHONE: () _____ FACSIMILE: () _____

TRADING REFERENCES

	COMPANY NAME	TELEPHONE
(1)	_____	_____
(2)	_____	_____
(3)	_____	_____

BANK: _____ BRANCH : _____

ACCOUNT NO: _____ ABN NO: _____

I CERTIFY THAT THE INFORMATION GIVEN IN THIS APPLICATION IS TRUE & CORRECT AND AGREE TO THE **TERMS & CONDITIONS** AS STATED IN THE PRICE LIST

NAME: _____ POSITION: _____

SIGNED: _____ DATE: _____

NOTE:

1. This application for Distributor/Reseller is subject to an official confirmation from B-Natural.
2. If you are a successful applicant, a membership fee applies. This information will be provided in the Dealership agreement.