



[www.DietAngel.com.my](http://www.DietAngel.com.my)

**Diet Angel Sdn. Bhd.**

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## RETAILER/WHOLESALE ACCOUNT APPLICATION FORM

Please fill up all information below and attach with the required documents.  
Kindly email completed form and all scanned documents to [info@dietangel.com.my](mailto:info@dietangel.com.my)

### ACCOUNT REGISTRATION & BUSINESS INFORMATION

COMPANY NAME: .....

COMPANY REGISTRATION NUMBER: .....

SST REGISTERED (please tick): YES  SST No. :..... NO

BUSINESS ADDRESS: .....

.....

.....

OPERATING DAYS & HOUR: .....

WEBSITE/ E-COMMERCE PORTAL: .....

FACEBOOK/SOCIAL MEDIA PAGE:.....

CONTACT PERSON: .....

JOB TITLE: .....

EMAIL: .....

CONTACT NUMBER: .....

TYPE OF BUSINESS (please tick):

SOLE PROPRIETORSHIP  PARTNERSHIP  SDN. BHD.  BERHAD.

MAIN BUSINESS ACTIVITY: .....

NUMBER OF YEARS/MONTHS IN BUSINESS: .....

#### DOCUMENTS REQUIRED:

Form 9, 24 and 49 ( Only for Sdn Bhd or Berhad company )

Form D, Maklumat Perniagaan and Maklumat Pemilik ( Only for Sole Proprietorship or Partnership Company )

Some pictures of outlet with signboard, internal shop layout (if applicable)

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#### For Office Use Only:

Approved  KIV  Rejected

Terms: .....

Date: .....