



LICENSE APPLICATION FORM

CONFIDENTIAL

PART A: Personal Applicant	
First Name	Surname
NRIC No. / Passport No.	Gender
Date of Birth	Nationality
Address	
City	State
Postcode	Country
Tel No.	Mobile No.
Fax No.	Best Time to Call
E-mail Address	Marital Status
Spouse's Name	Spouse's Surname
NRIC No./ Passport No.	Tel No.
Describe any physical disability or limitation.	YES / NO
Have you ever been charged of anything other than minor traffic violations? If yes, please explain.	YES / NO
Are you involved in pending litigation? If yes, please explain.	YES / NO

PART B: Company Applicants	
Company's Name	Registration No.
Address	
City	State
Postcode	Country
Nature of Business	
Type of Entity	No. of Employees
Capital Structure	
Paid Up Capital	Authorised Capital
Director's Name	Director's Name
NRIC No./ Passport No.	NRIC No./ Passport No.
Tel No.	Tel No.
Mobile No.	Mobile No.
Address	Address
City	City
Postcode	Postcode
State	State
Country	Country

PART C: Employment Details	
Present Occupation	
Date of Employment	From To
Employer's Name & Address	References
Tel No.	Fax No.
E-mail	Gross Salary per Month

PART D: Employment History	
Job Position	
Date of Employment	From To
Employer's Name & Address	References
Tel No.	Fax No.
E-mail	Reason of Leaving
Job Position	
Date of Employment	From To
Employer's Name & Address	References
Tel No.	Fax No.
E-mail	Reason of Leaving

PART E: Education <i>(From Higher Education to Secondary Education)</i>	
Name & Address of Institution	Course Description
Qualifications	Year
Name & Address of Institution	Course Description
Qualifications	Year
Name & Address of Institution	Course Description
Qualifications	Year
Name & Address of Institution	Course Description
Qualifications	Year

PART F: Financial Information			
<i>PERSONAL FINANCIAL STATEMENT</i>			
<i>Income Statement for 12 Month Period Ending _____</i>			Amount (RM)
Salary, Wages			
Bonus, Commission			
Dividends, Interest			
Other Income (please specify)			
TOTAL INCOME			
ASSETS	Amount (RM)	LIABILITIES	Amount (RM)
Cash on hand and in bank		Loans/ Notes/ Account Payable	
Securities, Shares, Unit Trusts		Property Mortgages	
Notes, Account Receivables		Other Debts or Obligations	
Property-Current Market Value			
Net Value of Business Interests		Total Liabilities	
Other-Automobile and Personal Property		Net Worth	
Total Assets		Total Liabilities and Net Worth	
Funds Available to Invest			
<u>Sources of Funds</u>			
Retained Earnings:		External Investor(s):	
Loan:		Others Source (please specify):	
Have you ever declared bankruptcy?			YES / NO
Do you have equity partners?			YES / NO
If YES, Name of your partners			
1)			
2)			
3)			
MAIN BANK DETAILS			
Name of the Bank		Branch	
Address			
Tel No.		Fax No.	
E-mail		Officer's Name	
Account Holder's Name			
Account No.			



PART G: Business Interest

Have you ever owned a business? If yes, please explain.

Have you ever had a business failure? If yes, please explain.

How did you heard about ECC Coffee licensing?

Do you plan to devote full time to this business venture?

Will your spouse be active in this business?

Are you ready to comply with policy and controls set by ECC Coffee?

What do you think are the reasons customers come to ECC Coffee?

What are your expectations in ECC Coffee licensing?

Why you believe you will become a successful ECC licensee?

When do you intend to commence the business operations? (Month/Year)

Will you be directly involved in training for operations? If yes, when would you available for training?

PART H: Geographic Interest	
<i>PREFERRED LOCATION</i>	
Priority Choice	Second Choice

PART I: References	
<i>BANK / CREDIT REFERENCES</i>	
Name	Tel No.
Address	
City	State
Postcode	Country
Name	Tel No.
Address	
City	State
Postcode	Country
<i>PERSONAL / BUSINESS REFERENCES</i>	
Name	Relationship
Tel No.	Mobile No.
Address	
City	State
Postcode	Country
Name	Relationship
Tel No.	Mobile No.
Address	
City	State
Postcode	Country



Declaration

I certify that the information in this Application is accurate and complete. *ECC Coffee (M) Sdn Bhd (1161128-V) (known as "ECC Coffee")* is authorized to investigate my background as it pertains to my qualifications. I further authorize ECC Coffee to obtain a credit report and obtain any other information about my credit history as it deems necessary to evaluate my suitability as a potential ECC Coffee licensee. I hereby declare that all information given above is true and correct.

I further understand that ECC Coffee has the sole right to approve or disapprove the Application for any reason it may determine. In the event that ECC Coffee disapproves this Application, ECC Coffee shall have no liability or ongoing obligations to me.

Please email, fax or send back to

ECC Coffee (M) Sdn. Bhd.
Gurney Tower R-G-B1-2, Jalan Kelawai,
10250 Penang, Malaysia
Email : license@ecccoffee.com
Tel :+604-2969466
Fax :+604-2969477

Applicant Signature

Date

Company Stamp

PERSONAL APPLICANT'S CHECKLIST

Photocopy of Identification (NRIC / Passport)

Bank Statement for 3 months

Processing Fee

COMPANY APPLICANT'S CHECKLIST

Certified true copy of Form 24

Certified true copy of Form 44

Certified true copy of Form 49

Memorandum & Articles of Association (M&A)

Bank Statement for 3 months

Processing Fee