

## DISTRIBUTOR/DEALER/AGENT APPLICATION FORM

### Private & Confidential

We are pleased that your Company is interested in becoming our **\*distributor/dealer/agent** (*\* please delete whichever is not applicable*). We aim to become the leader and the best in our area of specialization and we look forward to partnering with you should you qualify in this application.

At One BioSys Sdn Bhd, we don't just sell our products. We work closely with our partners (distributors, dealers and agents) to ensure that they are satisfied with our services and adhere to our standards. The successful applicant will be required to sign a more defining Distributor/Dealer/Agent Agreement with the company.

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1. Company Name: .....  
Address: .....  
Reg No: .....  
Date Incorporated: .....  
Tel: ..... Email: .....
  
2. Name of Director (s): .....  
IC No: .....  
Tel: ..... Email: .....
  
3. Contact Person 1 : .....  
Designation: .....  
Tel: ..... Email: .....
  
4. Contact Person 2 : .....  
Designation: .....  
Tel: ..... Email: .....

5. How many Wholesalers/Retailers network do you have?.....

- i. No of Sales Support staff .....
- ii. Proposed area of coverage (region) .....
- iii. Proposed amount of Investment .....
- iv. Warehouse Facilities (in sq. mtrs) .....
- v. Location of warehouse .....
- vi. How close is your warehouse to the main market? .....
- vii. Re-Distribution Facility (Vehicles, if any) .....
- viii. What is your industry segment? .....
- ix. What are the products you currently sell? .....

6. Presently dealing in any of our competitor's product(s)? YES/NO

If yes, provide the following details:

- i. How long have you been with the competitor? .....
- ii. Competitors Name: .....
- iii. In case of our acceptance of your application, what would you propose to do with your existing competitor's product? .....

## **Terms and Conditions:**

1. You should not sell our products outside the area assigned to you.
2. You should update One BioSys Sdn Bhd on the activities of our competitors & market situation from time to time.
3. The minimum order for the type of application must be fulfilled each month or the distributorship/dealership/agency will be revoked.
4. You must provide a photocopy of your SSM certificate.
5. You must provide us with a Bank reference from your Banker.
6. You must submit this official application to become a distributor/dealer/agent.
7. You must attach an ID photograph of the Company's Managing Director/Proprietor and the Company representative.
8. You must provide photocopy of any of Drivers Licence, National Identity Card or International Passport.
9. If your application is successful, your performance will determine your status as our Distributor.
10. You must place your first order within 1 week of appointment



All correspondence to:

One BioSys Sdn Bhd  
16, Jalan P4/8,  
Bandar Teknologi Kajang,  
43500 Semenyih, Selangor  
+603 8723 5880  
Email: [info@onebiosys.com](mailto:info@onebiosys.com)

I/we declare that all the particulars and information given in this Application Form are true, correct, complete and up to date in all respects and I/We have not withheld any information and I/we agree to abide by all the Terms & Conditions as listed above.

Signature & Stamp: .....

Name: .....

Designation: ..... Date: .....