Epo	Office	<b>AGIC KAN</b> e No.105, Hassa 971-43955011 Fa	nicor Building		ha First	Dubai LIAE			OVERSEAS			
DISTRIBU	JTOR ID# CE USE ONLY							ANT REGISTE				
	NT DETAILS							USER	E: COLUMNS MARKED WITH * ARE MANDATORY			
*FULL N												
*GENDE			FEMAL	E		*DATE	OFBIRI					
	SSPORT NO.:											
*CITY:	*CORRESPONDENCE ADDRESS: *CITY: *COUNTRY:											
-												
*PHONE NO.: *E-MAIL ADDRESS: APPLICANT BANK INFORMATION (THIS SECTION IS NOT MANDATORY TO BE FILLED FOR USER)												
*ACCOUNT HOLDER NAME:												
*ID / PA	SSPORT NO.	OR LICENSE NO.:										
*BANK N	IAME:											
*BANK L	OCATION:											
*IBAN CODE:												
*SWIFT	CODE:				*,	ACCOUNT NO.:	:					
		RRER INFORMAT	ION									
*ENROI	LLER NAME:						*EN	NROLLER'S ID :				
*REFER	RER NAME:	Same as Abo	ve		(	) A RANK	*RI	EFERRER'S ID :				
PRODUC	PRODUCT SERIAL NO. UNIT PRICE											
	SD501								AED 14,950 / USD 4,070			
	SUPER 501								AED 21,500 / USD 5,854			
	IRIV ANESPA DX								AED 11,000 / USD 2,995 AED 11,800 / USD 3,213			
	SD501-PT								AED 16,450 / USD 4,479			
	K8								AED 19,250 / USD 5,241			
	LEVELUK R			/					AED 7,200 / USD 1,960			
SHIPPIN	G CHARGE	*CUSTOM DUTY FE COUNTI		ED (5% VAT	"INCLUDE	DFOR ALL SHIPP	NG CHAR		L: (FOR SUPER 501 ONLY)			
							AED 1,420 / USD 387					
BAHRAIN, OMAN, KUWAIT, S			UDI ARABIA			95/ USD 108			AED 660 / USD 180			
EGYPT, JORDAN						70 / USD 128			AED 760 / USD 207			
IRAQ MAURITANIA, SOMALIA						00 / USD 245 75 / USD 265			AED 1,180 / USD 320 AED 1,540 / USD 419			
PAKISTAN				AED 440 / USD 120				AED 690 / USD 188				
	TURKEY G DETAILS				AED 5	45 / USD 148			AED 1,020 / USD 278			
	G ADDRESS:											
									AWB NO.			
CITY:									COUNTRY:			
RECEIVER NAME: PHONE NO.:												
		ECTION (IF REQU	IRED)				·					
									ORT NO, IS			
PAYING FOR												
	NT METHOD	SIGNATORE.							DATE			
		EMITTANCE / CHE	QUE		REDIT CA	RD-SINGLE						
UNIT PRICE:			AED / USD						FOR OFFICE USE ONLY			
SHIPPING:			AED / USD				-		RECEIVED BY (Name):			
TOTAL:			AED / USD				-					
		-					-		REGISTRATION DATE:			

## AGREEMENT

I CERTIFY THAT I UNDERSTOOD THE PROVISIONS OF ENAGIC KANGEN WATER EQUIPMENT L.L.C'S POLICIES AND PROCEDURES **(ONLY FOR DISTRIBUTOR)**. I HEREBY AGREE TO BE BOUND BY THE POLICIES AND PROCEDURES **(ONLY FOR DISTRIBUTOR)** INCLUDING ANY AMENDMENTS THERETO WHICH SHALL BE FURNISHED TO ME FROM TIME TO TIME.

I CONFIRM THAT I AM OF FULL LEGAL AGE AND ALL MY PERSONAL INFORMATION AND DATA ("PERSONAL DATA") STATED ABOVE ARE COMPLETE AND ACCURATE. I HEREBY ACKNOWLEDGE THAT MY PERSONAL INFORMATION MAY BE SHARED WITH ENAGIC'S RELATED AND/OR AFFILIATED COMPANY WITHIN UAE OR OUTSIDE UAE FOR THE PURPOSES OF PERFORMING THIS AGREEMENT.

## PLEASE CHECK (√) ONE:

- I HEREBY GIVE MY CONSENT TO ENAGIC KANGEN WATER EQUIPMENT L.L.C TO PROCESS AND/OR USE ANY OF MY DATA AND TO RELEASE THE SAME TO ENAGIC KANGEN WATER EQUIPMENT L.L.C'S RELATED AND/OR AFFILIATED COMPANY, ENAGIC'S EXISTING, FUTURE BUSINESS PARTNERS AND/OR STRATEGIC ALLIANCES AND/OR ANY OTHER 3RD PARTY AS ENAGIC KANGEN WATER EQUIPMENT L.L.C MAY IN ITS ABSOLUTE DISCRETION DEEM NECESSARY OR EXPEDIENT FOR THE PURPOSE OF MARKETING AND PROMOTION OF ITS PRODUCTS AND SERVICES. FURTHER AND IN ADDITION THERETO, I HEREBY CONFIRM THAT NO FURTHER PERMISSION NOR CONSENT FROM ME WOULD BE NESSECARY OR REQUIRED IN RELATION THERETO AND THAT THIS SHALL CONSTITUTE CONSENT FOR THE PROCESSING OF MY PERSONAL DATA UNDER THE PERSONAL DATA PROTECTION AND ANY OTHER CONTRACTUAL CONSENT FOR SUCH DISCLOSURE OF PERSONAL DATA OR INFORMATION.
- □ I DO NOT GIVE MY CONSENT NOR AUTHORISE ENAGIC KANGEN WATER EQUIPMENT L.L.C TO PROCESS AND/OR USE ANY OF MY DATA AND TO RELEASE THE SAME TO IT'S RELATED AND/OR AFFILIATED COMPANY, EXISTING, FUTURE BUSINESS PARTNERS AND/OR ANY OTHER 3RD PARTY FOR THE PURPOSE OF MARKETING AND PROMOTION OF ITS PRODUCTS AND SERVICES.

I AM AWARE THAT ENAGIC HAS THE RIGHT TO REJECT ANY APPLICATION WHEREBY IS INCOMPLETE AND/OR FALSIFICATION OF SIGNATURE AND/OR INITIAL HAS OCCURRED DURING THE SUBMISSION OF THIS PRODUCT APPLICATION FORM.

## PLEASE CHECK (√):

I HEREBY ACKNOWLEDGE THAT A FULL REFUND WILL BE GRANTED ONLY IF A PRODUCT PURCHASE HAS BEEN MADE DIRECTLY FROM ENAGIC
DUBAI OFFICE WITHIN 14 CALENDAR DAYS FROM THE DATE IT WAS PURCHASED AND THE PRODUCT MUST BE NOT OPENED.

MACHINE PICK-UP AUTHORIZATION SECTION (IF REQUIRED)						
I, (NAME OF BUYER)	ID/PASPORT NO.	AUTHORIZE				
(NAME OF PICK-UP)	ID/PASSPORT NO.	, TO PICK UP MY				
MACHINE (MODEL) FROM TH	E ENAGIC KANGEN WATER EQUIPMENT L.L.C OFFICE ON DAT	'E:				
I UNDERSTAND THAT THIS PERSON IS FULLY RESPONSIBLE FOR MY MACHINE FROM THE TIME IT LEAVES THE OFFICE UNTIL SUCH TIME AS I RECEIVE IT IN MY POSSESSION. ENAGIC WILL NOT BE HELD RESPONSIBLE FOR ANY BY DAMAGE THAT IS INCURRED UPON THE PRODUCT WHILE IN TRANSIT. I ALSO UNDERSTAND THAT THE RETURN POLICY TAKES EFFECT FROM THE TIME SAID MACHINE LEAVES THE OFFICE, AND NOT THE DATE IT IS RECEIVED BY ME, THE BUYER.						
SIGNATURE OF BUYER:		DATE:				
SIGNATURE AT PICK-UP:		DATE:				
APPLICANT'S SIGNATURE & DATE	ENROLLER'S SIGNATURE & DATE	REFERRER'S SIGNATURE & DATE				