APPLICATION FORM - INDIVIDUAL

PERSONAL PARTICULARS

Full Name as in NRIC / Passport (please underline surname)
Dr / Mr / Ms / Mrs / Mdm

Gender ☐ MALE ☐ FEMALE

NRIC/FIN	Passport No.
Date of Birth (DD/MM/YYYY)	Nationality

Contact No. (Home) (Handphone)

Home Address

Postal Code

Billing Address

Postal Code

Valid E-mail Address

(Please note that all future correspondences or notices will be sent through this e-mail address)

Preferred Payment Method: ☐ **GIRO** ☐ **Credit Card**

MY WORK

Company Name	Designation
Office Address	Office Tel No. / DID

MY DRIVING EXPERIENCE

Driver's Licence No.	Issue Date (DD/MM/YYYY)
Type ☐ Local ☐ Int'l	Expiry Date (DD/MM/YYYY)

Any Traffic Demerit Points in past 24 months? ☐ Yes ☐ No

If Yes, how many points?

During the past 12 months, I've driven a vehicle independently for

☐ Below 30hrs ☐ 30-60hrs ☐ Over 60hrs

I confirm that the membership plan and usage charges have been clearly explained to me and this is my acceptance.

Principal Applicant's Signature *Date*

PAYMENT FORM - GIRO

Kah Motor Co. Sdn Bhd 370 Ubi Road 3 Singapore 408651

PART I - FOR APPLICANT'S COMPLETION

Bank

Bank Branch

Applicant's Name

Applicant's Reference No. (Membership No.)

a) I/We hereby instruct you to process the BO's instructions to debit my/our account.
b) You are entitled to reject the BO's debit instruction if my/our account does not have sufficient funds and charge me/us a fee for this.You may also at your discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly.
c) This authorisation will remain in force until terminated by your written notice sent to my/our address last known to you or upon receipt of my/our written revocation through the BO.

My/Our Name (As in Bank Account)

My/Our Account No.

Contact (Tel/Fax) No.

Name of Organisation (BO): Kah Motor Co. Sdn Bhd

My/Our Stamp/Signature (As per Bank's record) *Date*

Note: For thumbprints, please go to the branch with your identification.Please sign for all amendments.

PART II - FOR BILLING ORGANISATION'S COMPLETION

Bank	Branch	DBS BANK
7171	008	008-00653-9

Customer Account No.

Bank	Branch	Account No. to be Debited

PART III - FOR FINANCIAL INSTITUTION'S COMPLETION

This Application is hereby REJECTED (Please tick) for the following reason(s):

☐ Signature/Thumbprint* differs from bank's records ☐ Wrong account no.
☐ Signature/Thumbprint* incomplete/unclear* ☐ Amendments not countersigned by customer
☐ Account operated by signature/thumbprint* ☐ Others: _____

Name of Approving Officer *Authorised Signature* *Date*

**Please delete where inappropriate*

PAYMENT FORM - CREDIT CARD

Kah Motor Co. Sdn Bhd 370 Ubi Road 3 Singapore 408651

STANDING INSTRUCTION FOR PAYMENT OF KAHSHARE MONTHLY CHARGES

☐ New Application ☐ Replacement of Card

Name (As on Credit Card)

NRIC/FIN

Contact No.

Credit Card No.	CVC
- - -	

Expiry Date (mm-yyyy) -20

Issuing Bank: _____

Charge to my Credit Card: ☐ VISA ☐ MASTERCARD

Terms and Conditions of Credit Card Payment

1. *The amount shown on your bill will be charged to your credit card on the due date and this will be reflected in your credit card statement.*
2. *To terminate this instruction permanently, please write to: Kah Motor Co. Sdn Bhd, 370 Ubi Road 3, Singapore 408651*
3. *For further enquiry, please contact us at 6840 6858 or at www.kahshare.com.sg*
4. *Successful application is also subjected to approved deduction of all fees & charges to the plan applied for.*

Signature as on Credit Card *Date*

Membership No.