

MyMilanMilan License Application Form

Thank you for your interest in pursuing a license with us. Kindly ensure the application form is completed in legible handwriting.

MyMilanMilan Licensing Application Form			
Applicant's Personal Details			
Full Name			
NRIC No.		Sex	
Date of Birth		Nationality	
Marital Status			
Address			
Postcode		State	
Tel. No.		Mobile No.	
Fax No.		Best Time To Call	
Email Address			
Education Information			
Highest Level of Education		Year of Graduate	
Name of College/University/School			
Occupation Information			
Position		Year of Experience	
Company Name			
Business Experience			
Position		Year of Experience	
Business Nature			
Please list any companies where you hold a directorship.			
Financial Disclosure			
Asset:			
1. Business	RM _____		
2. Real Estate/Properties	RM _____		
3. Cash in Hand/Bank	RM _____		
4. Others (Please Specify)	RM _____		
5. Total Assets	RM _____		
Liabilities:			
1. Loan Payable	RM _____		
2. Other Loans	RM _____		
3. Mortgages	RM _____		
4. Others (Please Specify)	RM _____		
5. Total Liabilities	RM _____		
Net Worth	RM _____		

Total cash to invest in MyMilanMilan	RM
Desired Location	
Preferred location	YES / NO. If YES, please fill in priority and second choice.
1. Priority location	
2. Second location	
Proposed Sales Volume	
1. a) Priority location b) Justification	RM
2. a) Secondary location b) Justification	RM
When do you intend to commence the Business Operations?	
Month / Year	
Additional Information	
Enquiries / Comments / Additional Information	
Note: Submission of interest is not confirmation of License Appointment and does not bind both the Licensor and Applicant in any manner.	
Signature: _____ Date : _____	

Please return the completed form us via post/fax/email.

MyMilan Milan Enterprise

HQ Address : No. 30-2, Jalan PJU 5/10,
Dataran Sunway,
Kota Damansara,
47810 Petaling Jaya.

Tel No : 603-6148 3199

Fax No : 603-6148 4168

Email Address : license@mymilanmilan.com.my

Contact Person : Ms Rachel Chong