



اَوْنِيُوْ سِيْتِيْ تِيْكَوْ لُوْ كِيْ مَارَا
UNIVERSITI
TEKNOLOGI
MARA

Faculty of Business Management

Diploma in Office Management and Technology

“Fitness Ladies Gym”

Fundamental of Entrepreneurship

ENT 300

BM118 5B

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Fitness Ladies Gym

Exercises routines plans

Table of Content

No.	Title	Page No.
1.	Introduction General Manager	1-16
2.	Marketing Plan	17-36
3.	Operation Plan	37-50
4.	Administration Plan	51-65
5.	Financial Plan	67-79
6.	Appendix	

Surat Kami : 100-UiTMKS (HEA. 30/7)
Tarikh : 12 Ogos 2014

KEPADA SESIAPA YANG BERKENAAN

Tuan/Puan

PENGESAHAN PELAJAR

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Sukacita sekiranya pihak tuan/puan dapat membantu dan memberi kerjasama kepada pelajar di atas dari Program **Diploma Pengurusan Dan Teknologi Pejabat** untuk membuat satu kertas projek bagi kursus **ENT300 (Fundamentals of Entrepreneurship)**.

Maklumat-maklumat daripada jabatan/agensi/syarikat tuan/puan amatlah diperlukan bagi melengkapkan kertas projek tersebut. Semua maklumat yang tuan/puan berikan adalah untuk tujuan akademik sahaja.

Sila hubungi Penyelia Projek, **ENCIK ABANG SULAIMAN** di talian **(082-675000)** sekiranya pihak tuan/puan ingin mendapatkan maklumat lanjut berkaitan perkara di atas.

Kerjasama daripada pihak tuan/puan kami dahului dengan ucapan ribuan terima kasih.

"BERSATU BERUSAHA BERBAKTI"

Sekian.

Yang benar



BAIZURA BINTI IBRAHIM
Pegawai Eksekutif
Bahagian Hal Ehwal Akademik
bp Rektor

SUBMISSION LETTER

ENT 300 students,
Diploma in Office Management in Technology
MARU University of Technology,
Samarahan Campus 2,
94300 Kota Samarahan,
Sarawak

Mr. Abang Sulaiman Bin Abang Naim
ENT300 Lecturer,
MARU University of Technology
Samarahan Campus 2
94300 Kota Samarahan,
Sarawak.

26 September 2014

Mr,

SUBMISSION OF BUSINESS PLAN

As representative of our business, "Ladies Fitness Gym", I would like to submit our business plan for your evaluation and further action. We are very grateful for the generous amount of motivation and support not to mention guidance given which has indeed paved the way and anchored us toward our aims and goal when preparing and finally completing this business plan on time and as scheduled.

2. For all five of us, ENT300 (Introduction to Entrepreneurship) subject has given us a clear picture on the fundamental so starting a business. Along the way, we gathered many ideas, which we personally felt, would have done much use and benefit to us if ever "Ladies Fitness Gym" became reality. We highly compute that it is not all that easy to become an entrepreneur what more a successful entrepreneur. It takes diligence and innovativeness in order to overcome all forms of obstacles and risks, all of which we have learnt as we attempted this business plan.

3. Your guidance and cooperation have taken us far by allowing this business plan to become a reality. It is insufficient to express our words of gratitude for all the knowledge that you have passed on to us as well as your continuous effort in assisting us as much as you can in completing this business plan.

Thank you

Yours faithfully,

(NOR NEDIJAH BINTI HASSAN)
General Manager

Acknowledgement

Acknowledgement

First and foremost, we would like to thank **Mr. Abang Sulaiman Bin Abang Naim** our ENT 300 lecturer for his encouragement and high-spirited motivation in assisting us in completing this project within the duration located. He also gives the useful advice and undying support to us so we can finish this Business Plan as perfect as possible. Without his guidance, we will never finish this Business Plan in time.

Secondly, we would like to show our appreciation to those neither directly nor indirectly involved in our project mainly to **HardCore Gym** and **UAG Gym** for kindly gives their cooperation to help our research in this business.

Thirdly, we want to thank our **classmates** for being supported and helpful although they have to finish their own Business Plan too. Also not to forget to our fellow friends from other course that takes ENT 300 and some that already pass it. They had been very cooperative especially helping us on how to do this Business plan and we really appreciated it. Thanks to them because of their helpful information and kindness.

Finally, we would like to express our gratitude to our **beloved family** for always supporting us. Even though they are not by our side during our study, but we always fell them besides us and fully support and encouraged us in doing our business plan. Also thanks to every each of single individual those have given their contribution to finalize this Business Plan. Thank you.

Introduction

INTRODUCTION

Nowadays, balancing household's or woman's responsibilities, commitments and quality time with their work, kids and family can be quite a challenge for them to maintain their fitness and health. In this era of technology also, development grows very fast directly proportional with years. It is very difficult to find woman's gym nowadays so we came out with an idea to provide gym and health services for woman with different level of ages. As development grows, the responsibility to maintain fitness and health are significant especially to woman.

Based on this reason, we can see there is a big opportunities and potential in providing gym and health service that can help them to have better health condition. We realize that it is necessary to all women to have a good fitness and health condition in order to increase their performance in work and makes them confident to appear in public. So, we have reached an agreement establish our business to plan and provide gym and health service for woman at every stage of ages at Kuching. We choose this location because this area has a big market and demands of the people is higher.

We believe that our business can expand very well but it depends on our systematic strategies especially in marketing aspect. Before we start our business, we have to count the risks and unpredictable circumstances such as competitors, economic downturn and demand of usage.

From the financial aspect, we are well prepared in order to face unpredictable situations. In order to run our business, we went through several legal stages. We found out that Kota Samarahan region in Kuching is the most potential place to achieve our business goals and objective.

Introduction

Business Background

Name of business: Ladies Fitness Gym

Address: No. 10 lot 5932 UNI Square, Block 26, MRLD Kota Samarahan, Kuching 9300 Kota Samarahan, Sarawak.

Tel. / email: 082799543/flgfitnessladiesgym@yahoo.com

Form of business: Provide gym and fitness service for female or woman

Main activity: Gym Service

Date for Business Registration: September 2014

Date of Commencement: January 2015

Initial (own) Capital: RM150, 000

Name of bank: Maybank

Bank Account No: 162786093030

Introduction

BACKGROUND OF OWNER / SHAREHOLDERS

GENERAL MANAGER



1. Name : Nor Nedijah Binti Hassan
- Identity Card Number : 860328-13-6324
- Permanent Address : No.11, Jalan Kampung Baru, Kampung Tekajong, 96200 Daro Sarawak.
- Tel No. : 014-5815305
- E-mail : white_diy94@yahoo.com
- Date of Birth : 28.03.1986
- Age : 27
- Nationality : Malaysian
- Religion : Islam
- Race : Melanau
- Marital Status : Single
- Academic Qualification: Bachelor in Business Management
- Courses Attended : Kursus Keusahawanan
- Skills : Management Leadership, Communication Skills, Solution Implement Skill
- Experience : Solution Implementer at SAINS, Kuching Sarawak, Assistant Manager of Curve Gym
- Current Job : General Manager

Introduction

ADMINISTRATIVE MANAGER



2. Name : Jenny Baon Anyi

Identity Card Number : 900630-13-6368

Permanent Address : 5964, Lorong 7-1, Desa Pujut, Bandar Baru Permyjaya, 98000
Miri, Sarawak.

Tel No. : 019-8591627

E-mail : tiptop3006@gmail.com

Date of Birth : 30 June 1990

Age : 24

Nationality : Malaysian

Religion : Christian

Race : Kenyah

Marital Status : Single

Academic Qualification: Bachelor in Administration and Office Management, UNIMAS

Courses Attended : Kursus Keusahawanan (Entrepreneurship)

Skills : Typing Skills, Note-Taking Skills and Office System Skills
Communication Skills

Experience : Administrative Assistant Manager Boulevard IT, Bhd.

Work Achievement : Best AAM of Boulevard IT Bhd. In 2008

Current Job : Administrative Manager

Introduction

MARKETING MANAGER



3. Name : Aiza Shaffi Ezzaty Binti Ramli

Identity Card Number : 891208-01-5960

Permanent Address : D3-801 Apartment Damai, Jalan Raja Lumu U4/17, Taman Subang
Delima, Subang Bestari, 40150 Shah Alam.

Tel No. : 014-7320514

E-mail : aizashaffiramli@gmail.com

Date of Birth : 8.12.1989

Age : 25

Nationality : Malaysian

Religion : Islam

Race : Melayu

Marital Status : Single

Academic Qualification: Bachelor in Marketing Administration in UiTM

Courses Attended : Kursus Keusahawanan (Entrepreneurship)

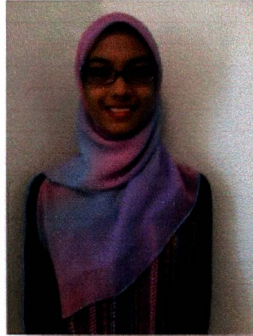
Skills : Calculation Skills
Communication Skills

Experience : Marketing Manager at Sime Darby Bhd

Current Job : Marketing Manager

Introduction

OPERATION MANAGER



4. Name : Fadzlielah Binti Yusof

Identity Card Number : 880213-14-6020

Permanent Address : No.3 Jalan PJS 2/3 Taman Datuk Harun, 46000 Petaling Jaya,
Selangor

Tel No. : 017-2413085

E-mail : amfadzlielah@yahoo.com

Date of Birth : 13.2.1988

Age : 26

Nationality : Malaysian

Religion : Islam

Race : Melayu

Marital Status : Single

Academic Qualification: Bachelor of Administration of UiTM

Courses Attended : Kursus Keusahawanan

Skills : Operation Skills
Management Skills

Experience : Operation Supervisor at TESCO Supermarket
Operation Supervisor at HARDCORE Gym

Current Job : Operation Manager

Introduction

FINANCIAL MANAGER



5. Name : Caroline Anak Rosna
Identity Card Number : 890321-13-5222
Permanent Address : 23, Lot 1591, Taman Sri Segedup, Jalan Batu Kawa, Kuching
Tel No. : 013-8279300
E-mail : carol_rosna@yahoo.com
Date of Birth : 21.3.1989
Age : 25
Nationality : Malaysian
Religion : Christian
Race : Bidayuh
Marital Status : Single
Academic Qualification: Bachelor in Financial Management
Courses Attended : Kursus Keusahawanan
Skills : Budgeting Skills
Experience : Accountant at Maybank, Batu Kawa
Work Achievement : Best Youth Financial Manager in 2010
Current Job : Financial Manager

Introduction

WHERE AS IT HEREBY MUTUALLY AGREED that the said first, second, third, fourth and fifth partners in the trade for business of health services upon the following terms:

1. This partnership is named Fitness Ladies Gym.
2. This agreement must be followed by partners with effect from 1st January 2015
3. This agreement is prepared by Walter Dior and Co. Advocates having it registered office at Lot Kwong Park, Jalan Nanas, 93250 Kuching, Sarawak.
4. The main activity of this partnership is providing gym services for ladies and women.

5. Capital Contribution:

General Manager	: RM30, 000
Marketing Manager	: RM30, 000
Operating Manager	: RM30, 000
Administration Manager	: RM30, 000
Financial Manager	: RM30, 000

6. Profit and loss of income earned according to the capital contribution.
7. All partners are liable for all liabilities incurred by the partnership business while all assets belong to the partnership.
8. The above particulars are agreed with their position were:

- Nor Nedijah Binti Hassan as General Manager
- Jenny Baon Anyi as Administrative Manager
- Aiza Shaffi Ezzaty Binti Ramli as Marketing Manager
- Fadzlielah Binti Yusof as Operation Manager
- Caroline Anak Rosna as Financial Manager

9. Tasks and responsibilities of partners are according to their respective positions.
10. Profit and loss are to be shared equally among partners. If one of the partners dies or retired, the contract or the business will still continue within three (3) months, without any notice from representative, therefore all profits earned belongs to the remaining partners.

Introduction

11. The partnership agreement must be made in writing where all the partners agreed to follow all the rules and regulations in this agreement and agreed to sign this agreement in front of the witness.

12. Time wherever mentioned shall be of the essence of this assignment.

13. Default clause:

“In the event of any breach of this aforesaid clause, this agreement shall terminate upon the written request of the either party upon that party having notice to the said breach and the aforesaid terms and conditions with regards to dissolution shall apply”.



Fitness Ladies Gym

Introduction

VISION

Provide best gym and fitness service operation for customer.

MISSION

To provide an excellent gym and fitness service for ladies or women by provides good quality of operations.

ORGANIZATION OBJECTIVES

The main objectives of our business were recognized by residents of Kota Samarahan.

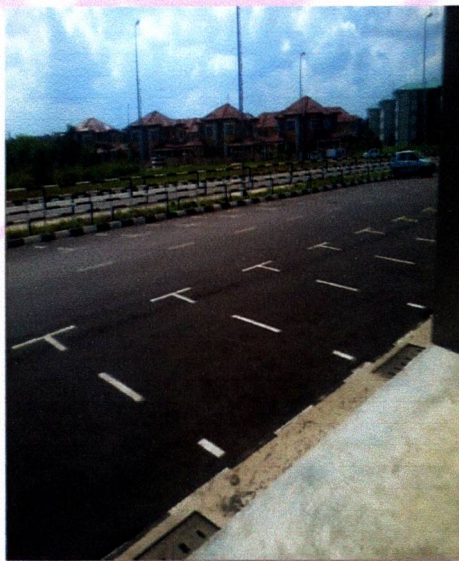
Therefore, we set our goals in our organization. The goals are stimulated as follows:-

- To be successful in the business of service industry
- To maintain the good co-operation and relationship between all the workers in order to have the excellent management and operations.
- To fulfil the customer's needs and satisfaction by always thinking of the better services for the customers.
- To create more job opportunities
- To provide gym service and reduces obesity rate among female or women.

Introduction

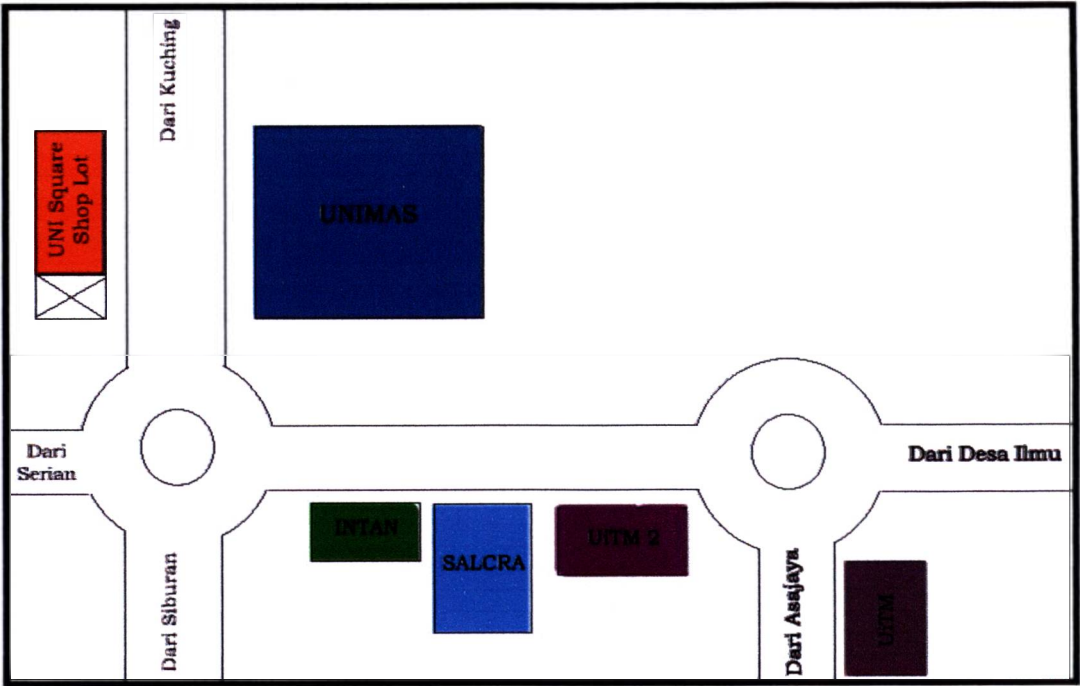
LOCATION

After discussion, we make that Kota Samarahan is the place where we are going to start our business. There are certain criteria why we choose Kota Samarahan. The criteria are as below:



Introduction

LOCATION MAP



ADDRESS: No. 10 lot 5932 UNI Square, Block 26, MRLD Kota Samarahan , Kuching
9300 Kota Samarahan, Sarawak.

LOGO



- ✚ The **Fitness Ladies Gym** is the name of our business
- ✚ The girl picture depict our objective of services because our gym is only open for female or women
- ✚ The round boundaries at behind the girl's picture refer to the freedom and comfortability of ladies or women that using our service with enjoyable

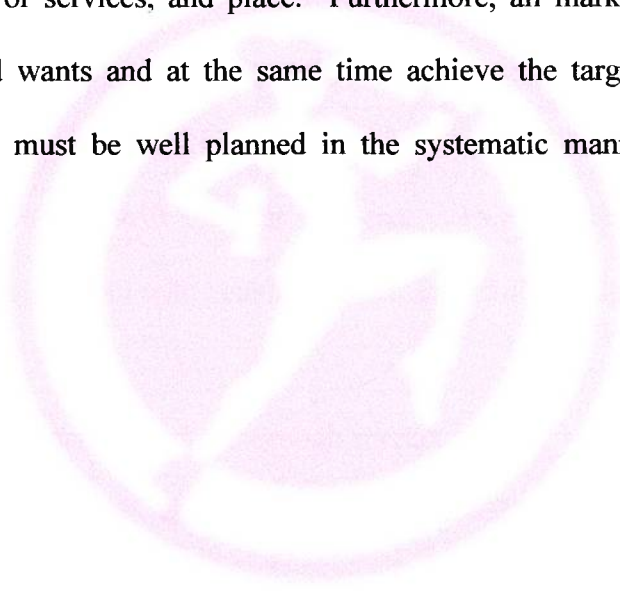
MARKETING PLAN

Marketing Plan

Introduction

Marketing is a social and managerial process by which individual and group obtain what they need and want through creating and exchanging product and value with others. In addition, marketing is activities that are carried out systematically to encourage and increase sales of products or services as long as the activities are in line with religious and ethical practices.

Marketing is also defined as the conceptual of the marketing mix that includes price, promotion, product or services, and place. Furthermore, all marketing activities must satisfy customer needs and wants and at the same time achieve the targeted profits. However, the marketing activities must be well planned in a systematic manner in order to achieve the business goal.



Fitness Ladies Gym

Marketing Plan

Market Target

Target market is to ensure that marketing efforts fulfill customer's needs and wants as well as bring profits. This is to ensure that the marketing efforts taken are within the scope and capabilities of the business. The target market is therefore defined as the group of customers with needs and wants that can be satisfied by the business through the supply of services. Moreover, target market can be defined as a target several or a particular market segments.

Our business is Fitness Ladies Gym (FLG) will be set up in Kota Samarahan. The reason that we set up our business in this place is because it is a residential area, shopping mall, shop and university student that will use our services. Our business is specializing to female customer and we provide them with health facilities and aerobic program such as zumba dance.

After much discussion and a thorough market survey, we have decided that this is the best place to give our services. We had decided and agreed to open our business located at Kota Samarahan. This is the strategic place to open our business because of the factor that the place is close to the residential area, shopping mall, shop and university student.

Marketing Plan

Market Size

In other market our service, we also have been identify the market size for our services. Market size refers to the potential purchase of the target market which is including residential area, shopping mall, shops and university student.

As a new business or as a new fitness services especially Fitness Ladies Gym (FLG), our market size only included the professional groups within Kota Samarahan area. This is because there are a lot of customers especially in the residential area who needs our services in Desa Ilmu. Market size is normally in term of units or in Ringgit Malaysia (RM). All of them will calculate daily, monthly, or yearly.

To identify the number of population is an important element to analyze the data for sale forecast. This is because the sale forecast is depending on the target market area based on the statistic providing by the census of Kota Samarahan District Office.

The population number in Kota Samarahan is 70, 966. There are 2.56% that will use the services.

Marketing Plan

Calculation

Population in Kota Samarahan = 70 966

Percentage of market size = 2.56% of population

$$\begin{aligned}\text{Target Market population} &= \frac{2.56}{100} \times 70\,966 \\ &= 1,419.32\end{aligned}$$

Therefore the total for market size = 1,419.32

The total market size is that we assumed one person spend on the serviced is averaged RM255 per month.

$$\begin{aligned}\text{Total market size per month in price} &= 1,419.32 \times \text{RM}255.00 \\ &= \text{RM } 361,926.60\end{aligned}$$

Therefore, the total market size in price per month= RM 361, 926.60

$$\begin{aligned}\text{The total market size in price per year} &= \text{RM}361,926.60 \times 12 \text{ month} \\ &= \text{RM}4,343,119.20\end{aligned}$$

Marketing Plan

Competitors

Competitors refer to other businesses that offer similar product, substitutes or alternative products or services to the same target market.

List of Competitors (Strengths and Weakness)

NO.	Competitors	Address	Strength	Weakness
1.	Gym Iron Hardcore	No. 8 Lot 5932 UNI Square, 94300 Kota Samarahan, Sarawak	➤ Well-known ➤ Separate place for different gender to exercise. ➤ Strategic place	➤ Limited services ➤ Expensive price
2.	De Gym	Kuching – Samarahan Expressway, 94300 Kota Samarahan	➤ Strategic place ➤ Wide	➤ Limited services ➤ Expensive price

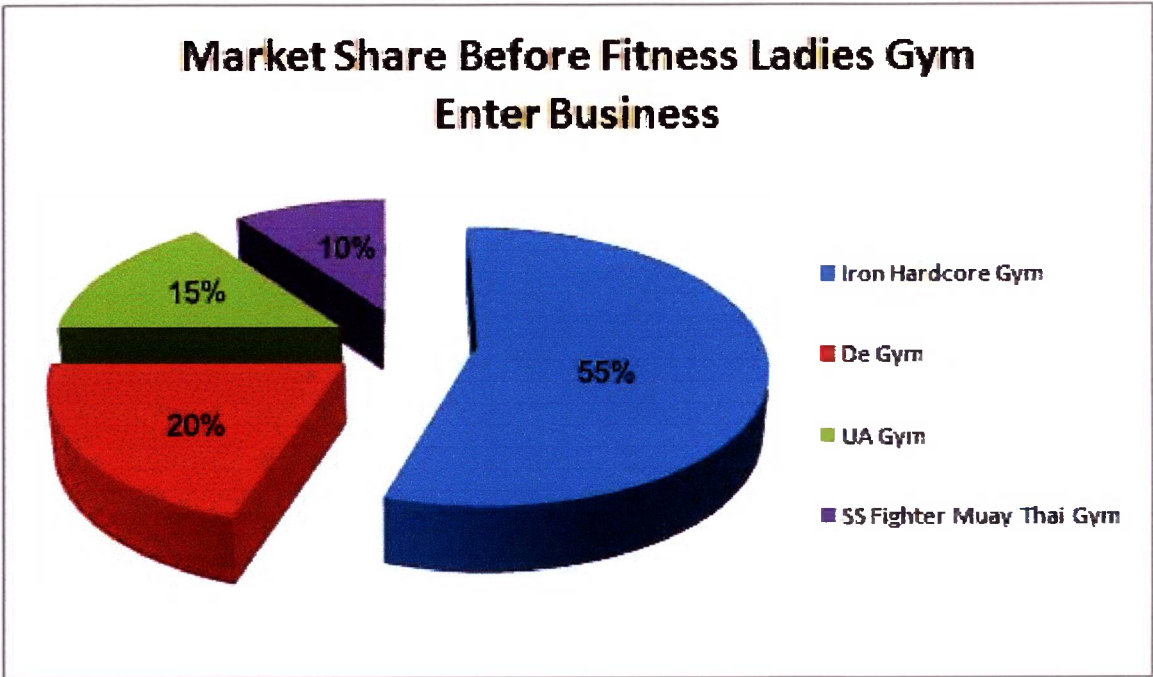
Marketing Plan

3.	UA Gym	Sublot 1, 2 nd Floor, Lot 3022, Jalan Datuk Mohd Musa, Desa Ilmu Phase II, 94300 Kota Samarahan, Sarawak	➤ Provide comfortable facilities to customer ➤ Provide aerobic and zumba classes	➤ No separate place for male and female. ➤ No locker provided
4.	SS Fighter Muay Thai Gym	1 st & 2 nd Floor, Sublot 11 & 12, Lot 13453-13454, Jalan Semarak, Section 65, KTL D, Sarawak, 93050 Kuching	➤ Provide facilities for Muay Thai and Gym ➤ Strategic Place	➤ Specialize to Muay Thai ➤ Expensive Price ➤ No separate place for male and female.

Marketing Plan

Market share before Fitness Ladies Gym (FLG) enters business

NO.	Competitors	Estimate of Market Share (%)	Estimated of Yearly Income (RM)
1.	Gym Iron Hardcore	55%	2, 388, 715.60
2.	De Gym	20%	868, 623.80
3.	UA Gym	15%	651, 467.88
4.	SS Fighter Muay Thai Gym	10%	434, 311.92
TOTAL		100%	4, 343, 119.20



Marketing Plan

Market share after Fitness Ladies Gym (FLG) enter business

NO.	Competitors	Estimate of Market Share (%)	Estimated of Yearly Income (RM)
1.	Gym Iron Hardcore	50%	2, 171, 559.60
2.	De Gym	20%	868, 623.80
3.	UA Gym	15%	651, 467.88
4.	SS Fighter Muay Thai Gym	10%	434, 311.92
5.	Fitness Ladies Gym (FLG)	5%	217, 156
TOTAL		100%	4, 343, 119.20

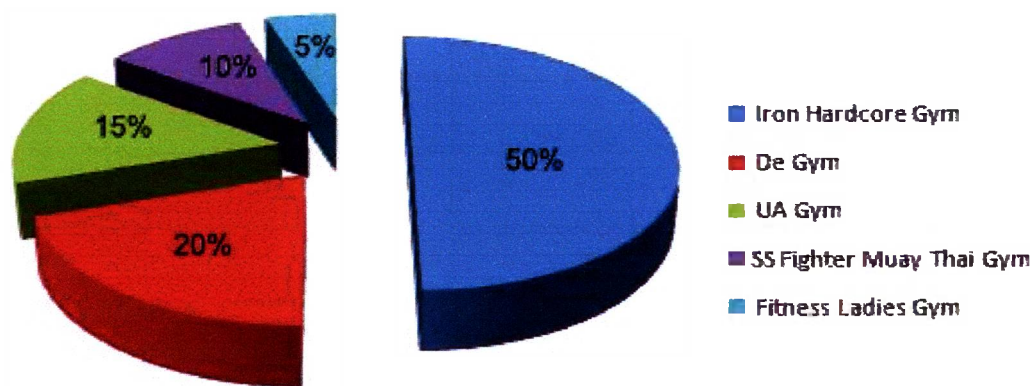
Estimated Market Sales = 5% × Total Market Shares per Year

= 5% × 4, 343, 119.20

=217, 156

Fitness Ladies Gym

Market Share After Fitness Ladies Gym Enter Business



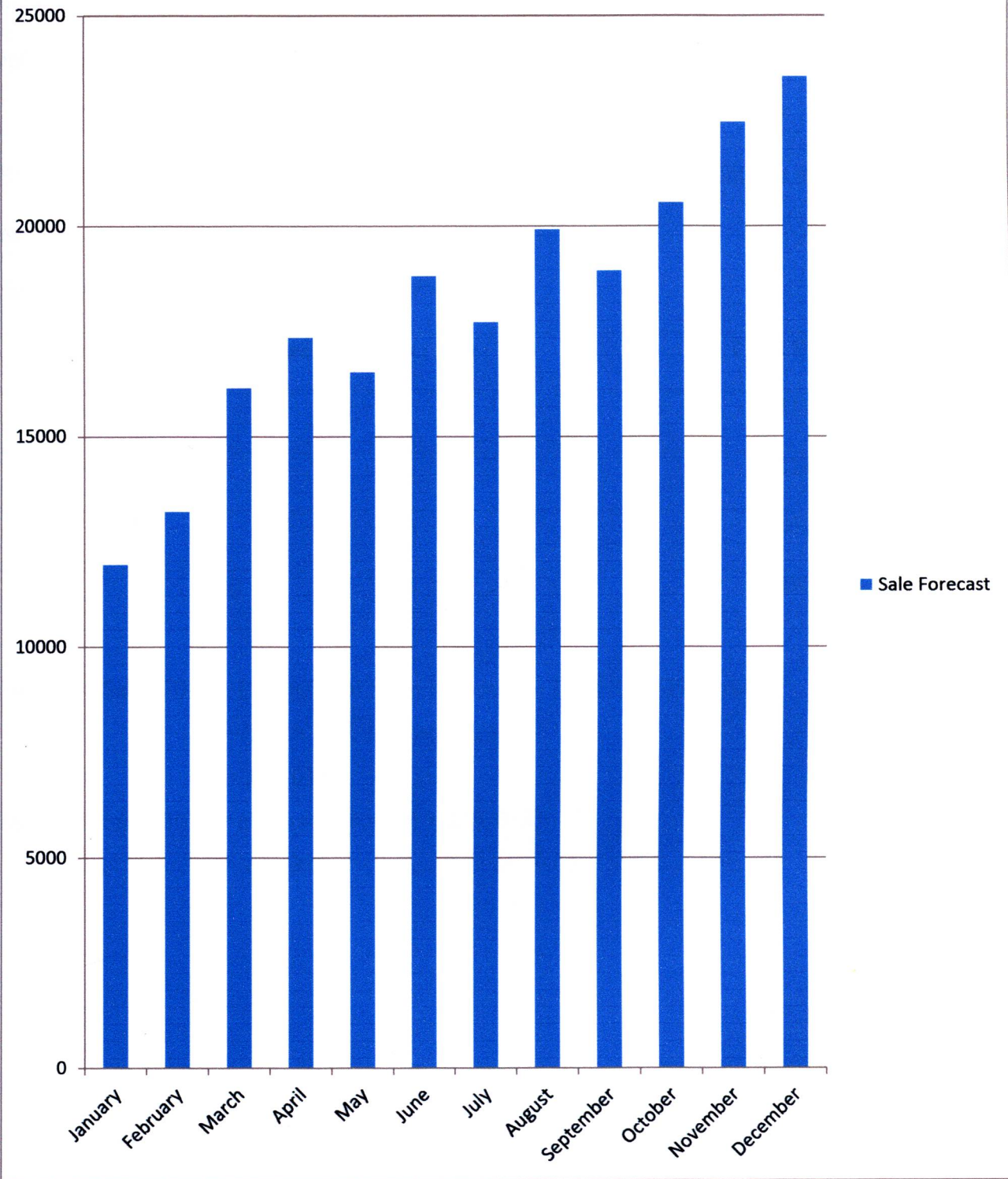
Fitness Ladies Gym

Marketing Plan

Sales Forecast

Month	Sales Collection (RM)
January	11, 960
February	13, 216
March	16, 156
April	17 347
May	16 524
June	18 812
July	17 706
August	19 917
September	18 936
October	20 558
November	22 472
December	23 552
TOTAL	217, 156

Sale Forecast



Marketing Plan

The lowest sale service = RM11, 960(January)

In this month, our Fitness Ladies Gym is still new in this business and we are the new comers and people are still not known our business

The highest sale service = RM23, 552(December)

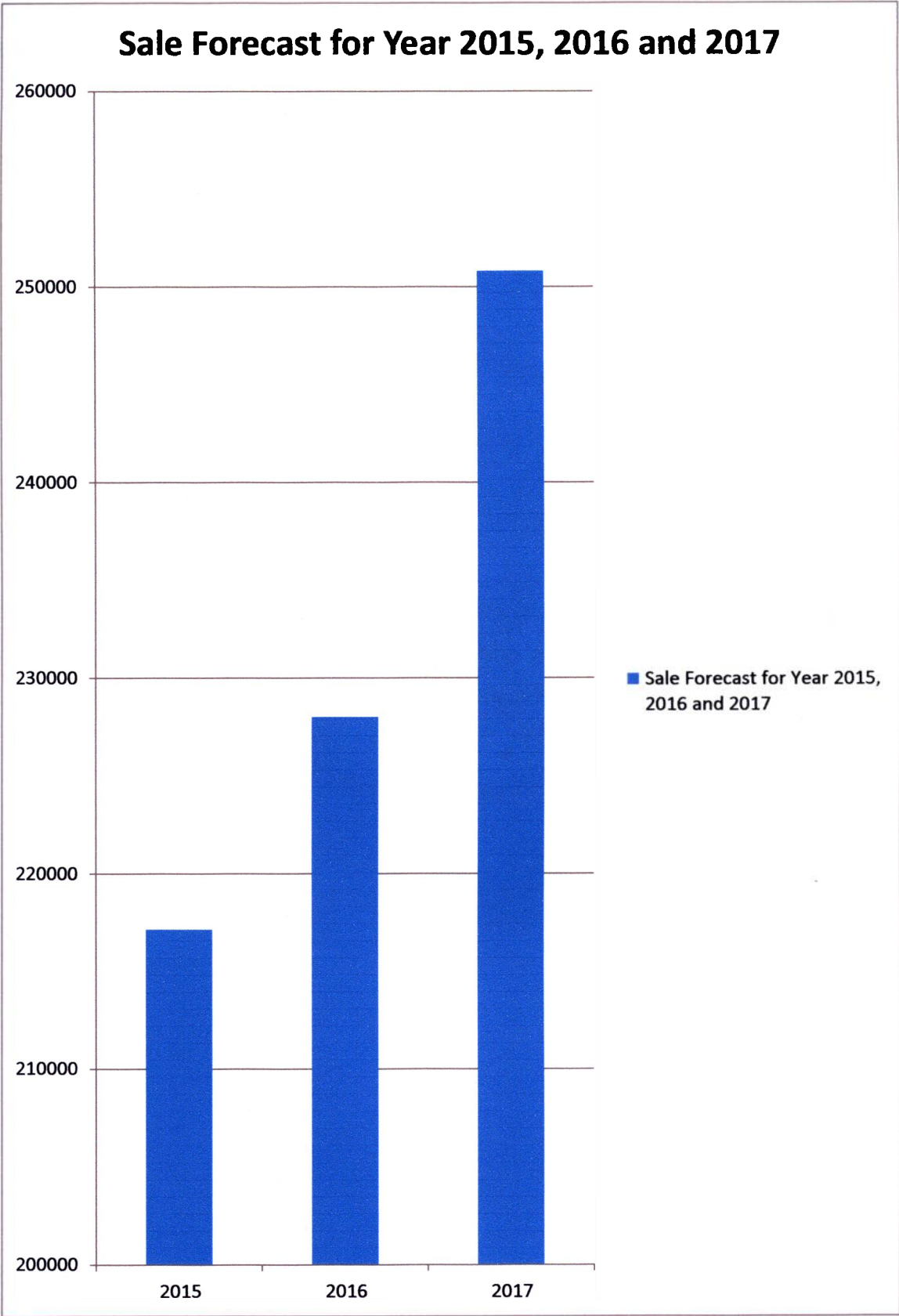
People already known and familiar with our business and they start to continue to use our services.

Sales Forecast for the year 2016, and 2017

Year	Percentage Increase (%)	Total Sales (RM)
2015	-	217, 156
2016	5%	228, 014
2017	10%	250, 815
	Total	695, 985

Estimated Sales 2016 = (5% × Total Sales Forecast) + Total Sales Forecast
= (5% × 217, 156) + 217, 156
= 228, 014

Estimated Sales 2017 = (10% × 228, 014) + 228, 014
= 250, 815



Marketing Plan

Marketing Strategy

Fitness Ladies Gym (FLG) is the new comer in this branch of business, so a good marketing strategy is vital for us to make enough profits, apart from meeting the need of the consumers. Our marketing strategy comprises four key variables, which also known as the 4Ps of marketing, they are,

1. Product and services strategy
2. Price
3. Place
4. Promotion

1. Product and services strategy

The quality of the services is very important factor to make sure the customers satisfy and help promotes our business. This will help our business increase and expand widely. Excellent services from us also help to achieve our goal.

Marketing Plan

2. Price

Price is the amount of the charged to the customer for the particular purchase. Normally, price may attract people or customer to use our service. Basically, pricing of services depend on the services quality. As our business at Kota Samarahan, we offer are lower or more less the same with the competitors' price. The price strategy that we used is Competition Based Pricing. It is because the business bases its price largely on the competitor's prices and the going-rate pricing is quite popular and is most often used when businesses bid for jobs.

Types	Price offered by FITNESS LADIES GYM (FLG)
Members Fee	RM 100 monthly -unlimited access to all facilities and equipment -free locker upon request -free to choose exercise or aerobic class -for card holder only
Walk – in for using gym equipment	RM 7 per session -unlimited access to all facilities and equipment -RM0.50 for locker rental upon request
Walk-in for classes	RM 4 per session -Zumba and aerobic classes that suitable for age 18 until 40 -Each classes being conducted for 30 minutes per session

Marketing Plan

3. Placed

The place or distribution strategy describes how the product will be made available to target customers when and where they need it. Good distribution strategies make services available to customers in the right quantities when and where they are needed and to ensure the product offered reaches the target customer.



The front view of the store that rent



The parking area in front of the store

Marketing Plan

4. Promotion

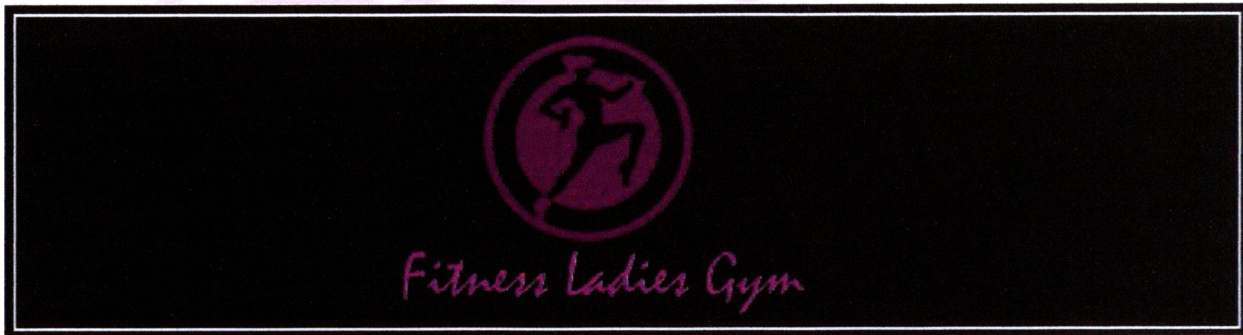
Promotion strategy is used to disseminate information about the business services with the purpose of attracting the target market.

Advertising

Advertising may defined as a non-personal communication through the identified target market. This is the one of the way to promote our business to the customer. In selecting advertising media, we decided to use:

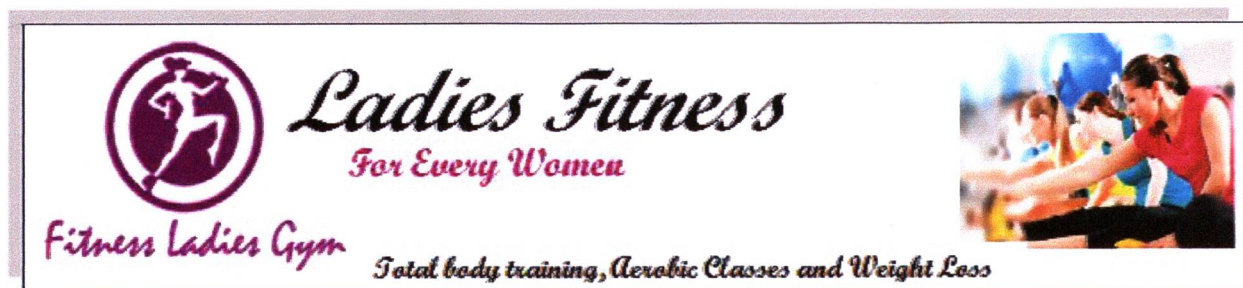
a) Signboard

Signboard is the most simple and straightforward messages with a lot of details s not difficult to understand. In addition it may attract people to take a look over it.



b) Banner

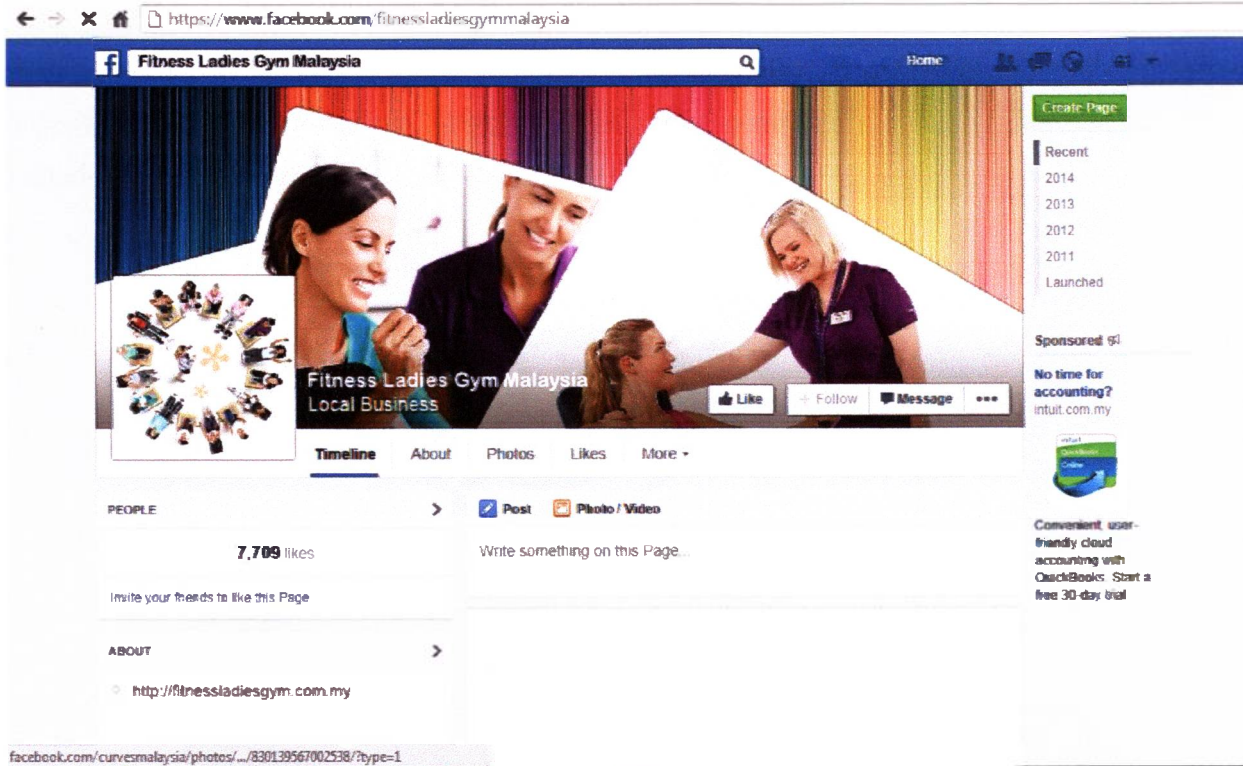
As a new business, we need to introduce our service. We will place it at the several main road and junction.



Marketing Plan

c) Network Advertising

Network advertising is a medium that able to advertise through internet. It is also a type of business opportunity that is very popular among public.



d) Business Card

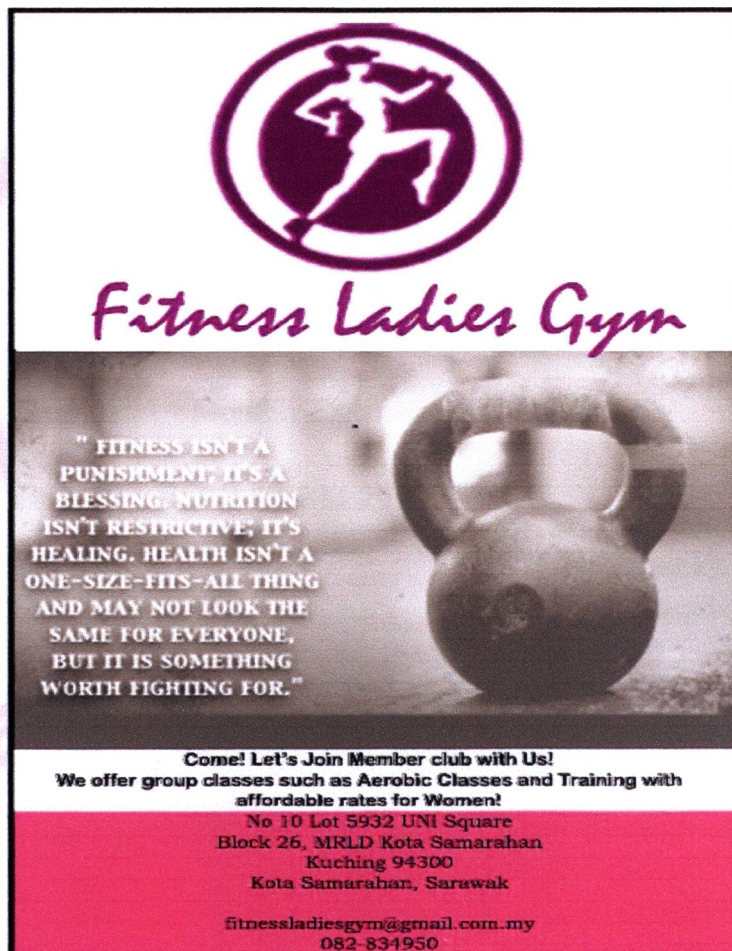
Business card is very efficient in order to enable customer to contact us. It is to familiarize our nearest friends and customers.



Marketing Plan

e) Flyers

A flyer is a single page leaflet advertising services, event or other activity. Flyers are typically used by individuals or business to promote their products or services. There is a form of mass marketing or small scale, community communication. Flyers are handed out on the street, posted on bulletin board, or given away at events. Bulletin boards are found on college, campuses, in café, community meeting houses, Laundromats and small markets.



Marketing Plan

Marketing Budget

No.	Particulars	Quantity (unit)	Price per unit (RM)	Fixed Asset (RM)	Monthly Expenditure	Other Expenses (RM)
1.	Opening Ceremony	-	-	-	-	2 000
2.	Signboard	1	750	750	-	-
3.	Utilities	-	-	-	100	-
4.	Business Card	200	1.50	-	-	300
5.	Banner	1	200	-	-	200
6.	Flyers	200	1.00	-	-	200
TOTAL				750	100	2 700

Total Market Budget = Fixed Asset + Monthly Expenses + Other Expenses

= RM 750 + RM 100 + RM 2 700

= RM 3 550

OPERATION PLAN

Operation Plan

INTRODUCTION

Apart from administrative and marketing plans, entrepreneurs should also plan their operation activities to ensure that the business will meet customers' expectations, which include production parameters such as quality, quantity and time.

Operations management can be defined as the process of marshaling resources to produce output through the transformation process. The operations process comprises three main components, i.e. business input, transformation system and output.

Business input refers to all resources required to produce a particular output. Examples of input are manpower, raw material, machines and equipment, technology, information and capital. The transformation system refers to the activities involved in transforming into output. Among others, the processing system involves planning of raw material, designing of operational process, planning of floor layout and distributing of manpower in the organization.

Output refers to the end product created as the result of transformation process. Business output can be categorized into either products or services. As input is transformed into output, it acquires added value, whereby the value of the output is higher than the total value.

Operation Plan

OPERATION OBJECTIVES

The main objectives of FITNESS LADIES GYM is to give a best quality of services to our clients by providing many types of gym equipment and classes for women in order to make them satisfied with these service and stay health for long-term.

In a business, objectives are very important because it is acting as a guideline for our business project. We should establish our own strategy in order to make the business successful. Other than that, it is also to ensure that all the expectations forecast can be achieved in a successful manner. We have outlined our business objectives as stated below.

1. To make sure that all the operation activities will be run properly and effectively by the workers who are responsible for it and able to achieved the business goal.
2. To ensure that our services will give satisfaction to the customers.
3. To maximize the sustainable profit growth and minimize the lost.
4. To make our company grow faster in order to be more competitive in the business.
5. To make sure the performance of our business operation will be successful.

Operation Plan

BUSINESS HOURS

Day	Hour
Monday to Friday	10 a.m. – 10 p.m.
Saturday and Sunday	8 a.m. – 10 p.m.

On Monday to Friday, we run our business for 12 hours. We open our shop at 10.00 a.m. and will close at 10.00 p.m. for Monday and Friday. We will close during public holiday. Within the 12 hours of working, we will close during lunch time from 12.00 p.m. to 2.00 p.m. On Saturday and Sunday, we open our shop at 8.00 a.m. and will close at 10.00 p.m.

OPERATION HOURS

Day	Hour
Monday to Friday	Start at 9.30 a.m. End at 10.30 p.m.
Saturday and Sunday	Start at 7.30 a.m. End at 10.30 p.m.

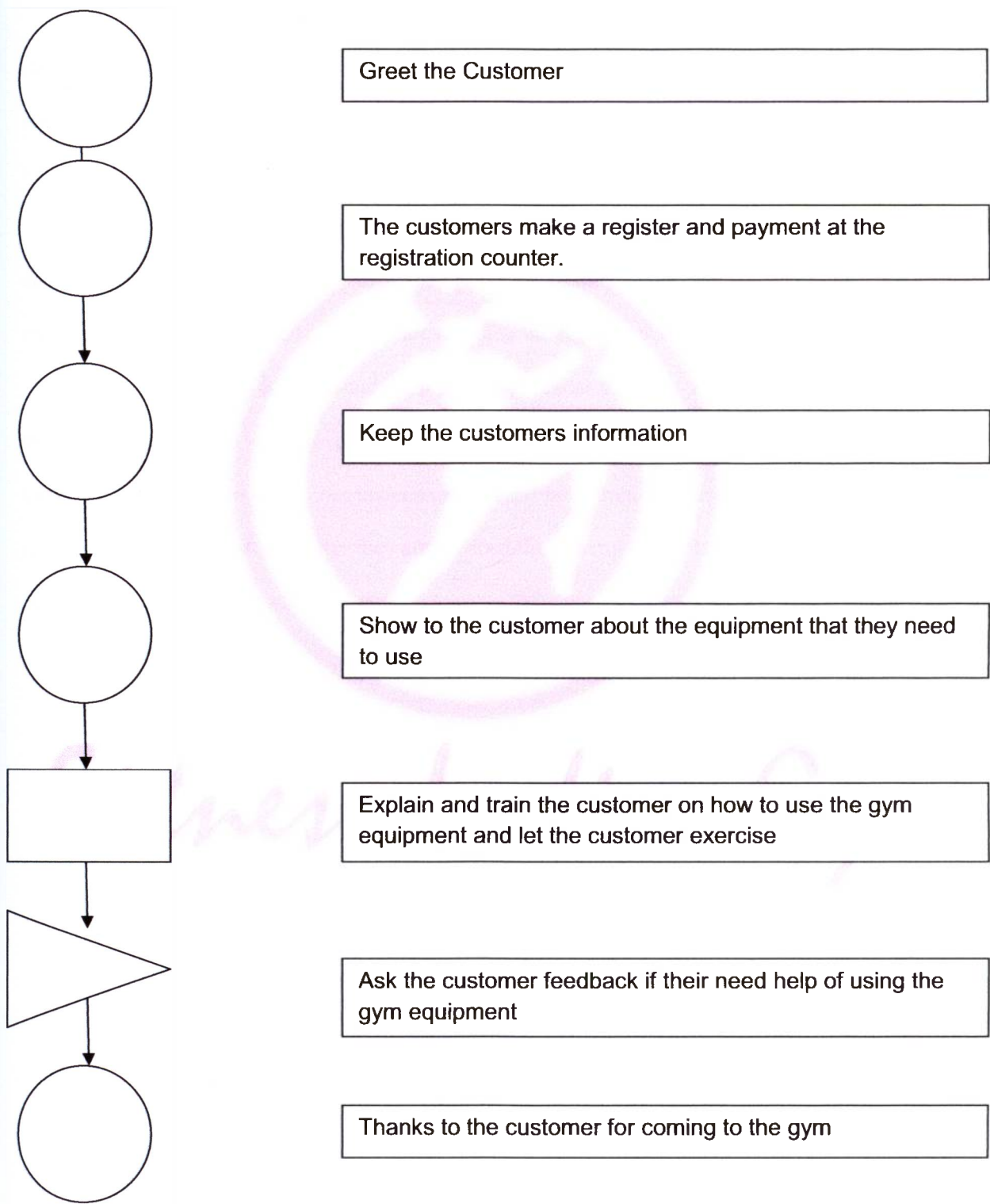
We have discussed among ourselves and agreed that the operations hours are according to the current demand by our target market. This to ensure our customers are satisfied with our service.

If there are any enquires from our customers, they can contact us via our office telephone.

Operation Plan

SERVICE PLANNING

Process Flow Chart for Fitness Ladies Gym



Operation Plan

PLANNING

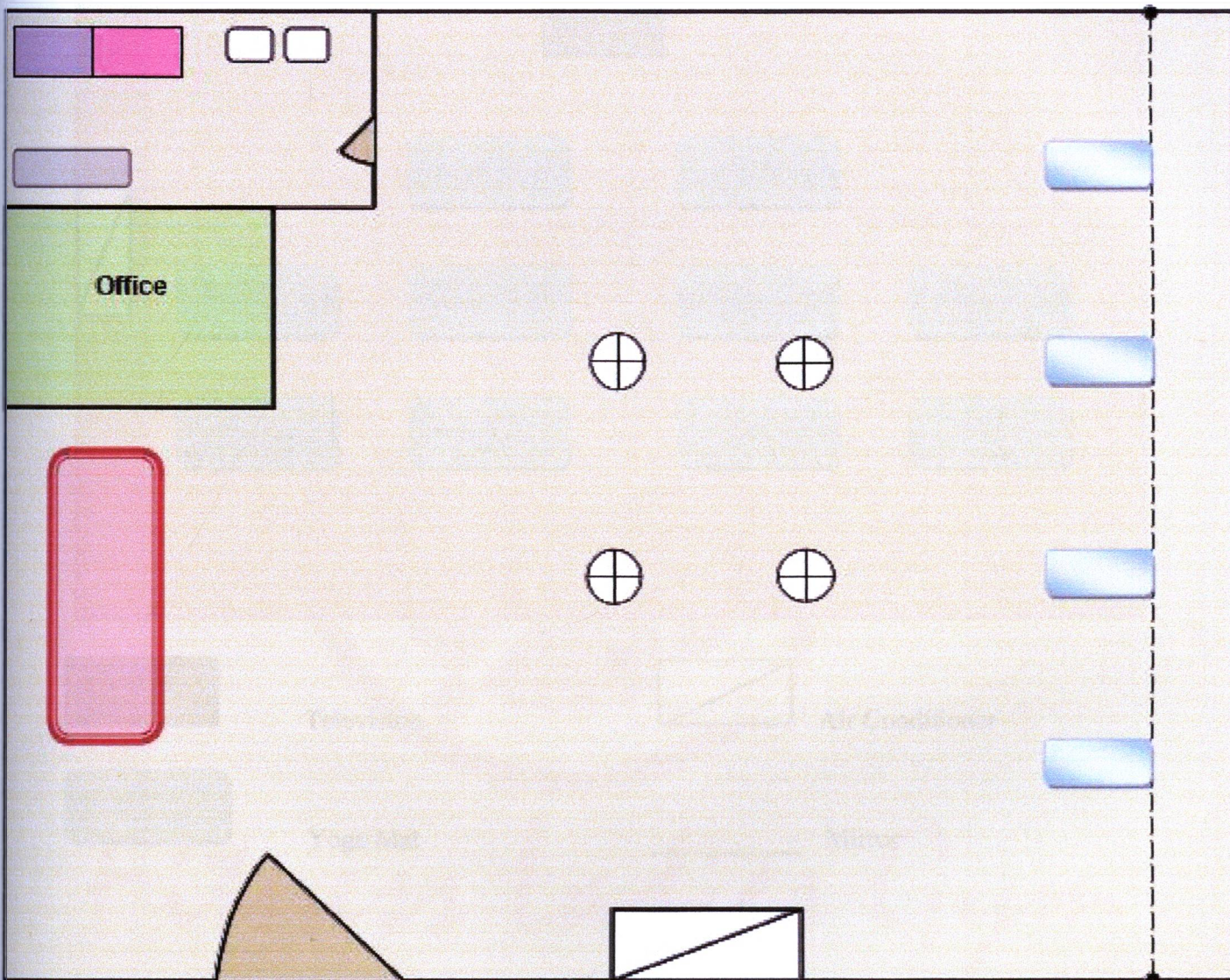
In FITNESS LADIES GYM Centre, we make our services more professionally by greeting the customer and smile to them politely as they walk in to the gym. They will feel comfortable and appreciated when we greet them nicely. We are very sure that the customer will love our mannerism towards them.

After they entered the shop, the customers make a register and payment at the registration counter and keep their information. We will briefly explain carefully about our services being provided. The customers will a payment first after they are deciding the services that they want.

Next is show to the customers about the equipment that they need to use. We will explain and train them on how to use the equipment slowly and let the customer exercise so that they could understand. If the customer do not understand or need help from us, they can ask for it. Lastly, we will say thank you to the customer after they are finished their exercises or classes, choosing our fitness centre and not forget to ask them to come again.

Operation Plan

OFFICE LAYOUT



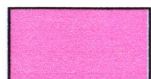
Shower Room



Registration Counter



Sink



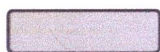
Toilet



Fitness Bike



Door



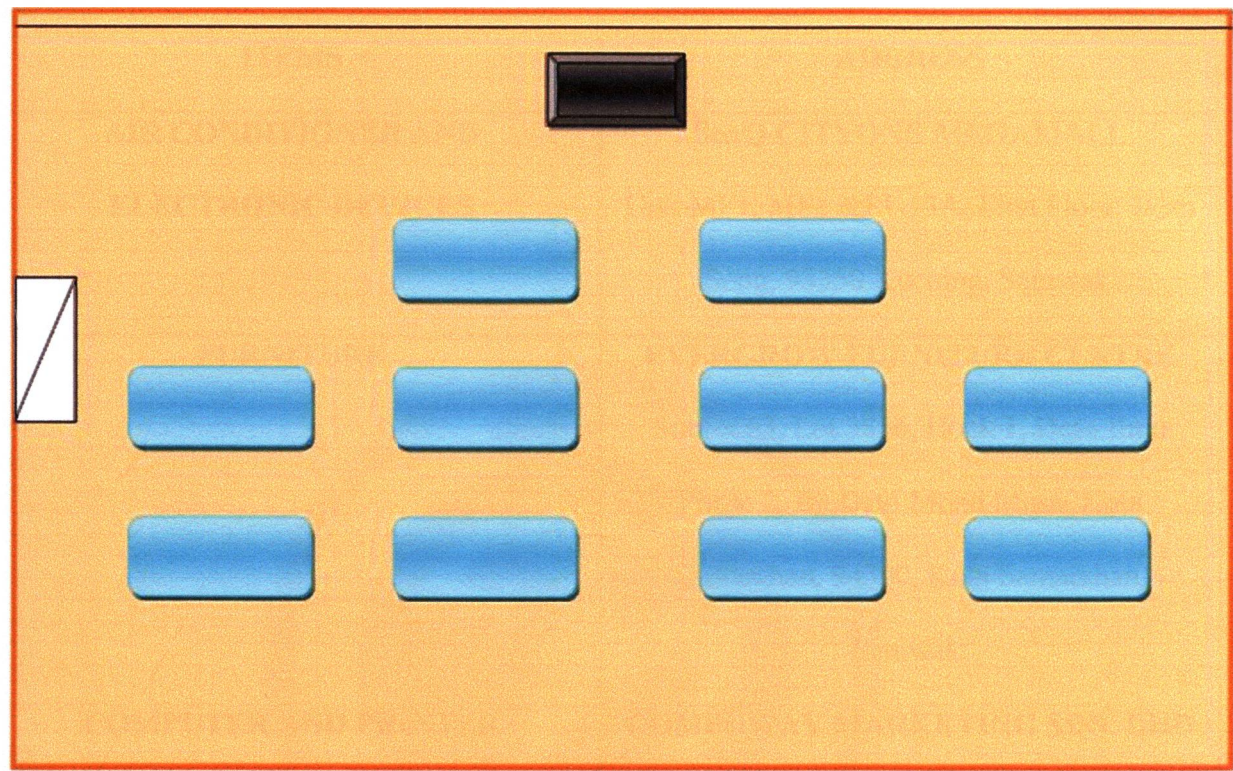
Locker



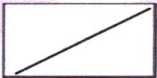
Treadmill

Operation Plan

ZUMBA AND AEROBIC ROOM LAYOUT



Television



Air Conditioner



Yoga Mat

____ Mirror

Operation Plan

SUPPLIERS

ITEMS	ADDRESS
AIR CONDITIONER AND ELECTRONIC DEVICES	SenQ CITYONE MEGAMALL Unit MF1, MF2 & F1-13A, First Floor, Jalan Song, 93350 Kuching, Sarawak.
FURNITURE	EVERGROW FURNITURE CENTRE Sublot 63, Lot 3856, Hock 1, Desa Ilmu Phase 2, Jln Dato Mohd Musa, Kota Samarahan, 94300, Kota Samarahan, Sarawak.
COMPUTER AND PRINTER	COMPUWAY MARKETING SDN. BHD Lot 14, Lower Ground Floor, Wisma Saberkas, 93150, Kuching, Sarawak.
TOILETRIES	GIANT SUPERMARKET No. 1, Tabuan Tranquility Commercial Centre, Jalan Canna, 93350, Kuching Sarawak.
FIRST AID KIT	DAMAI PHARMACY Ground Floor, 25, Tabuan Height Commercial Centre, Lot 46, Jalan Song, Kuching, 93350, Kuching, Sarawak.

Operation Plan

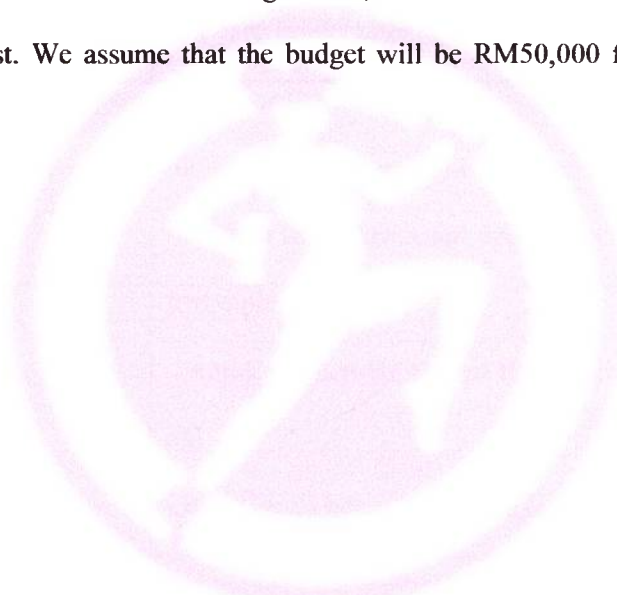
FIRE EXTINGUISHER	IBU PEJABAT BOMBA SARAWAK Jalan Setia Raja, Tabuan Jaya 93350 Kuching.
GYM EQUIPMENT	GINTELL CONCEPT STORE L1, Boulevard Shopping Mall, 9324, Jalan Datuk Tawi SII, 93250 Kuching, Sarawak.
TOILETRIES ACCESSORIES	BAN HONG ENTERPRISE COMPANY Lot 225B, A bell Road, 93100 Kuching, Sarawak, Malaysia.

Operation Plan

Material Planning

The first time we started our business, we assume that the budget for materials cost would be RM150, 000 for all products. After discussing among us, we decided to order the materials within the amount that we estimated and we managed to get low prices for the products from Gintell Concept Store. It is our main dealer for fitness gym services.

For the 1st month and the following month, we will start to order the machine and equipment based on sale forecast. We assume that the budget will be RM50,000 for the first month for all gym equipment.



Fitness Ladies Gym

Operation Plan

Prices of our services

Types	Price offered by FITNESS LADIES GYM (FLG)
Members Fee	RM 100 monthly -unlimited access to all facilities and equipment -free locker upon request -free to choose exercise or aerobics class -for card holder only
Walk – in for using gym equipment	RM 7 per session -unlimited access to all facilities and equipment -RM0.50 for locker rental upon request
Walk-in for classes	RM 4 per session -Zumba and aerobic classes that suitable for age above 18 – 40 years old -each classes being conducted for 1 hour per session a day

Operation Plan

Machines/Equipment Planning

No.	Machinery and Equipment	Quantity	Price/Unit (RM)	Total Price (RM)
1.	Treadmill	4	7,988	31,952
2.	Magnetic Fitness Bike	4	2,800	11,200
3.	Yoga Ball	2	480	960
4.	Yoga Mat	10	49.90	499
5.	Air-conditioner	2	1,439	2,878
6.	Television Flat Screen	1	1,599	1,599
7.	DVD Player	1	144	144
8.	DVD Disk	10	1.50	15
9.	Locker Cabinet	2	1,029	2,058
TOTAL				51,305

Operation Plan

Toiletries

No.	Items	Quantity	Price/Unit (RM)	Total Price (RM)
1.	Toilet Bowl with sink and water tap	2	988	1,976
2.	Toilet Tissue	1 bags	12	12
3.	Water heater	2	274	548
4.	Shower cream	3 bottles	9	27
TOTAL				2,289

Operation Plan

Operational Budget

Item	Fixed Asset (RM)	Monthly Expenses (RM)	Other Expenses (RM)
Machinery and Equipment	51,305		
Operation Cost			
Toiletries			
-soap		27	
-toilet tissue		12	
Other expenses			
Toiletries			
-toilet bowl with sink and water tap			1,976
-water heater			548
TOTAL (RM)	51,305	39	2,524

TOTAL= RM51, 305+RM39+RM2, 524
=RM53, 868

ADMINISTRATION PLAN

Administration Plan

INTRODUCTION TO ADMINISTRATION PLAN

An administrator is one of the important positions in a company where it is setting up a business that concerns with the resources of administration that can help to achieve or organizational goals. The vision and mission of the company is set up by the administration department. The administrator ensures that every resource is given to the every department equally based on their needs. Administration department will manage the salaries of the staff in the business.

ADMINISTRATION VISION

Provide best health service operation for customer and staff.

ADMINISTRAION MISSION

To provide an excellent health service for customers and staff by provides good quality of operations.

ADMINISTRATIVE OBJECTIVE

The main objectives of our business were recognized by residents of Kota Samarahan. Therefore, we set our goals in our organization. The goals are stimulated as follows:-

- To be successful in the business admin of health service.
- To maintain the good co-operation and relationship between all the workers in order have the excellent management and operations.
- To fulfil the customers and staffs needs and satisfaction by always thinking of the better services for the customers.
- To create more job opportunities.

Administration Plan

LABOUR INCENTIVES

SALARY

- Staff will be given a minimum salary that is set up by the government.
- Salary payment will be paid on 28th day of every month.

EMPLOYEES PROVIDENT FUND (EPF)

- Every partners and workers have to register as the EPF member.
- 13% of the employee salary will be deducted from the employer of the business.
- 11% of the employee salary will be deducted from the employee salary

SOCIAL SECURITY ORGANIZATION (SOCSO)

- Every partners and workers are registered as SOCSO member.
- The contribution of the business employer is 2.5% to each staff of the business.

ANNUAL LEAVE

- Provision for twenty days on annual leave for partners and workers of continuous services.
- All partners and workers must have approval from managers before take the annual leave.

SICK LEAVE

- This is concern with health condition of the employees.

BONUS

- Bonus will be given once a year or probably given twice a year to the employee according to the profit earn for every year.

Administration Plan

SCHEDULE OF TASKS AND RESPONSIBILITIES

POSITION	RESPONSIBILITIES
General Manager	➤ To manage the whole activity of the company that to achieve the objectives of the business. ➤ To target short term and long term planning of the business. ➤ To plan and monitor strategic progress of the business. ➤ To be accountable for the overall performance of the business.
Administration Manager	➤ To play administration roles in the business. ➤ To select, recruit experienced and qualified worker to fill vacancies. ➤ To set up payroll, hiring, compensation and training function. ➤ To set up payroll, hiring, compensation and training function.
Operating Manager	➤ To ensure the operation roles in the business runs effectively and efficiently. ➤ To ensure the service given operate accordingly to the customer needs and expectation

Administration Plan

	➤ To deal with supplier of the business and have good relation with them. ➤ Able to analyse the workers job performance and avoid idle in operation.
Marketing Manager	➤ To analyse market demand and supply to fit the market. ➤ To know competitor skills and to manage the business in the market ➤ To search extra information of the strength and the weaknesses of the competitors. ➤ To prepare business forecast.
Finance Manger	➤ To prepare the financial data for the organization and forecast organization expenses and profit. ➤ To calculate the expenses and profit the business. ➤ To keep every records that involve in the business. ➤ To forecast the organization expenses and profit.
Supervisor	➤ To supervise the staff duties of the business ➤ To handle the matters in the business.

Administration Plan

General worker	➤ To help the management to handle in the operation of the business.
Cashier	➤ To control the cash flow in and flow out of the business.



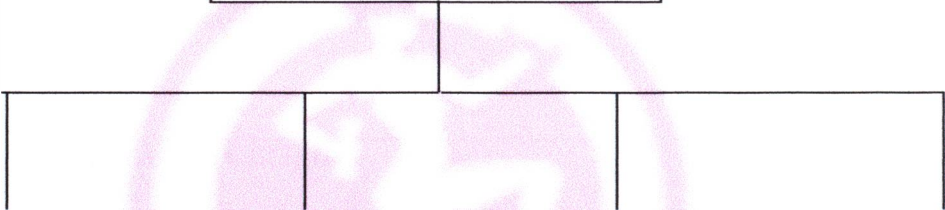
Fitness Ladies Gym

Administration Plan

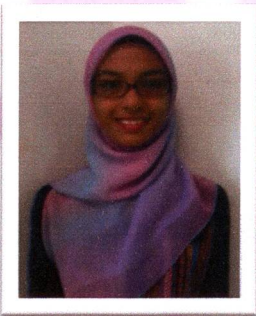
AN ORGANISATIONAL STRUCTURE BASED ON FUNCTIONS



GENERAL MANAGER/SUPERVISOR
NOR NEDIJAH BT. HASSAN



**ADMINISTRATION
MANAGER/
GENERAL WORKER**
JENNY BAON ANYI



**OPERATION
MANAGER/
GENERAL WORKER**
FADZLIELAH BINTI
YUSOF



**MARKETING
MANAGER/GENERAL
WORKER**
AIZA SHAFFI EZZATY
BT. RAMLI



**FINANCAL
MANAGER/CASHIER**
CAROLINE AK
ROSNA

Administration Plan

POSITON AND NUMBER OF STAFF

POSITON		NUMBER OF STAFF
GENERAL MANAGER/SUPERVISOR		1
ADMINISTRATION		1
MANAGER/GENERAL WORKER		
OPERATION	MANAGER/GENERAL	1
WORKER		
MARKETING	MANAGER/GENERAL	1
WORKER		
FINANCE MANAGER/CASHIER		1
TOTAL		5

Administration Plan

REMUNERATION OF STAFF

POSITION	NO.	MONTHLY SALARY (RM)	EPF CONTRIBUTION (13%) (RM)	SOCSSO CONTRIBUTION (2.5%)	AMOUNT (RM)
GENERAL MANAGER/ SUPERVISOR	1	1,200	156	30	1,386
ADMINISTRATION MANAGER/ GENERAL WORKER	1	1,000	130	25	1,155
OPERATION MANAGER/ GENERAL WORKER	1	1,000	130	25	1,155
MARKETING MANAGER/ GENERAL WORKER	1	1,000	130	25	1,155
FINANCE MANAGER/ CASHIER	1	1,000	130	25	1,155
TOTAL	5	5,200	676	130	6,006

Administration Plan

LIST OF FURNITURE, FITTINGS AND EQUIPMENT

OFFICE FURNITURE

ITEM	QUANTITY	PRICE PER UNIT (RM)	TOTAL COST (RM)
OFFICE TABLE	1	200	200
VISITOR'S CHAIR	2	52	104
GENERAL MANAGER'S CHAIR	1	170	170
AIR- CONDITIONER	1	1,588	1,588
FILLING CABINET	1	499	499
TOTAL			2,561

OFFICE EQUIPMENT

ITEM	QUANTITY	PRICE PER UNIT (RM)	TOTAL COST (RM)
COMPUTER	1	1,299	1,299
PRINTER	1	299	299
TELEPHONE	1	50	50
WALL CLOCK	1	69	69
FIRST AID-KIT	1	50	50
FIRE EXTINGUISHER	1	150	150
NOTICE BOARD	1	30	30
TOTAL			1,947

Administration Plan

STATIONARY

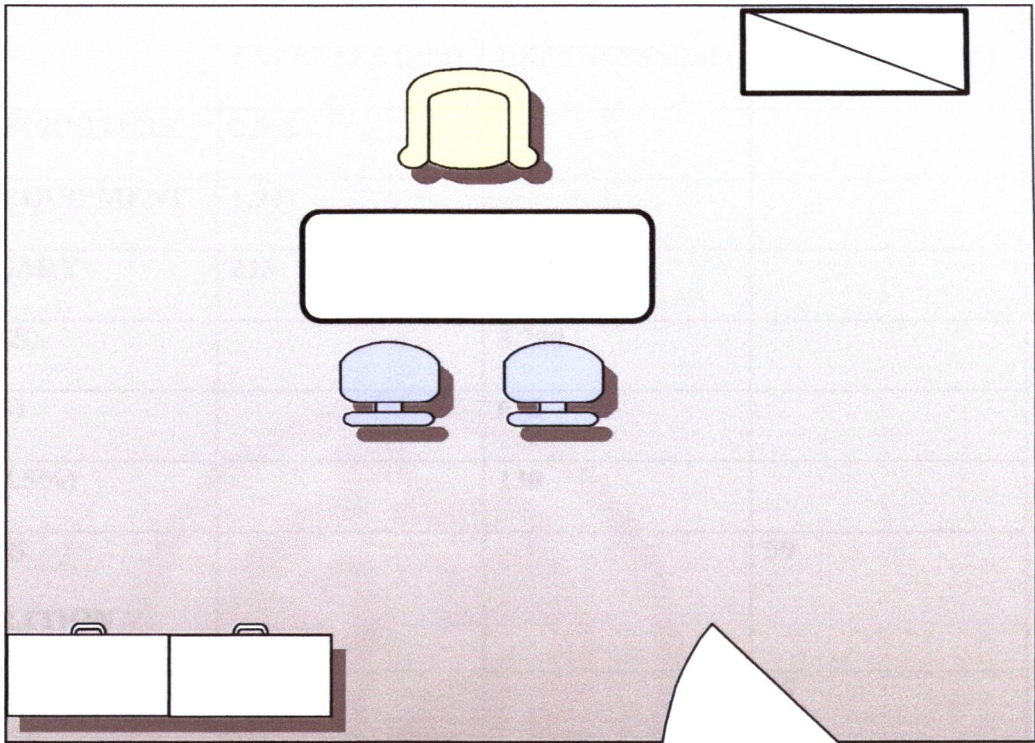
ITEM	QUANTITY	PRICE PER UNIT (RM)	TOTAL COST (RM)
A4 PAPER	1 SET	15	15
PEN	1 SET	15	15
RECEIPT BOOK	5	5	25
STAMP	2	12	24
STAPLER	2	5	10
STAPLER INK	1 SET	2	2
PRINTER INK	1 SET	60	60
PUNCH HOLE	1	3	3
LIQUID PAPER	1	3	3
SCISSOR	1	2	2
PAPER CLIP	1 SET	4	4
FILE	1 SET	50	50
TOTAL			213

Administration Plan

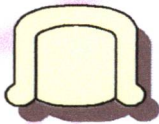
SUPPLIERS

ITEMS	ADDRESS
AIR CONDITIONER	TAN AIR CONDITIONING & ENGINEERING SDN. BH No. 8236, Ground Floor, Jalan Pending 93450 Kuching, Sarawak.
FURNITURE	EVERGORW FURNITURE CENTRE Sublot 63, Lot 3856, Block 1, Desa Ilmu Phase 2, Jalan Dato Mohd Musa, Kota Samarahan, 94300, Kota Samarahan, Sarawak.
COMPUTER AND PRINTER	COMPUWAY MARKETING SDN. BHD Lot 14, Lower Ground Floor, Wisma Saberkas, 93150, Kuching, Sarawak.
STATIONARIES	POPULAR BOOKSTORE Level 3, Tun Jugah Centre, 18 Jalan Tunku Abdul Rahman, 93100, Kuching, Sarawak.
FIRST AID KIT	DAMAI PHARMACY Ground Floor, Lot 5347, Desa Ilmu, Phase 25, Jalan Datuk Mohd Musa, 94300 Samarahan, Sarawak.
FIRE EXTINGUISHER	IBU PEJABAT BOMBA SARAWAK Jalan Setia Raja, Tabuan Jaya 93350 Kuching.

OFFICE LAYOUT



FILE CABINET



GENERAL MANAGER'S
CHAIR



OFFICE TABLE



VISITOR'S CHAIR



AIR CONDITIONER

Administration Plan

ADMINISTRATION BUDGET

	FIXED ASSETS EXPENSES (RM)	MONTHLY EXPENSES (RM)	OTHER EXPENSES (RM)
OFFICE FURNITURE	2,561		
OFFICE EQUIPMENT	1,947		
STATIONARY	213		
SALARIES		5,200	
EPF (13%)		676	
SOCSSO (2.5%)		130	
BUSINESS REGISTRATION			50
BUSINESS LICENSE			25
RENTAL DEPOSIT			6,000
RENTAL		3,000	
UTILITIES DEPOSIT: ELECTRICITY WATER TELEPHONE			500 350 300
UTILITIES: ELECTRICITY WATER TELEPHONE		700 150 150	
RENOVATION			40,000

Administration Plan

TOTAL	4,721	10,006	47,225
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ADMINISTRATIVE BUDGET:

FIXED ASSET + MONTHLY EXPENSES + OTHER EXPENSES:

RM 4,508 + RM 10,006 + RM 47, 438 = RM 61,952

TOTAL: RM 61,952



Fitness Ladies Gym

FINANCIAL PLAN

Financial Plan

Introduction to Financial Plan

Financial planning is a systematic approach whereby it helps to maximize the financial resources by utilizing financial tools to achieve financial goals. Financial planning is also known as the task of determining how a business will afford to achieve its strategic goals and objectives. A financial plan can also be an estimation of cash needs and a decision on how to raise the cash, such as through borrowing or issuing additional contribution in a business.

The financial plan is prepared after all the budget information from marketing, administration and operation aspects are completed. This perspective budget is then transformed into financial budget to identify the cost of this projection. It is supported by depreciation schedules for every fixed asset owned. After all the budget information is compiled, the financial plan is then prepared via several pro forma statements such as cash flow, balance sheet and income statement.

The Importance of Financial Plan

- ✚ Financial planning helps you to determine short and long term financial goals and create a balanced plan to meet those goals.
- ✚ To manage income more effectively. Manage income helps you to understand how much money you will need for other expenditures and profits.
- ✚ To control the cash flow. Increase cash flows by carefully monitoring spending patterns and expenses. Help earned more cash.

Financial Plan

- ✚ Preparation for initial capital. To determine the initial capital is sufficient and to determine the size of investment in the future.
- ✚ Guideline. To be used as a guideline for implementation and identified the relevant sources of the finance.

Good financial plan criteria

- Amount of depreciation on fixed asset is available
- Amount of total financial budget is available
- Balance sheet, income statement and cash flow are free from error
- Capital structure of the new firm
- Cash inflow and outflow for the planned period
- Financial position at the end of the planned period
- Total project implementation cost is available

Financial Plan

Ladies Fitness Gym					
PROJECT IMPLEMENTATION COST & SOURCES OF FINANCE					
Project Implementation Cost		Sources of Finance			
Requirements	Cost	Loan	Hire-Purchase	Own Contribution	
				Cash	Existing F. Assets
Fixed Assets					
Land & Building					
Office Furniture	2,561			2,561	
Office Equipment	1,947			1,947	
Stationary	213			213	
reno	40,000			40,000	
Signboard	750			750	
Machinery & Equipment	51,305			51,305	
Working Capital	1 months				
Administrative	8,411			8,411	
Marketing	100			100	
Operations	39			39	
Pre-Operations & Other Expenditure	12,449			12,449	
Contingencies	10% 11,778	(1)		11,778	
TOTAL	129,553	(1)		129,553	

Financial Plan

ADMINISTRATIVE BUDGET				
Particulars	F.Assets	Monthly Exp.	Others	Total
Fixed Assets				
Land & Building	-			-
Office Furniture	2,561			2,561
Office Equipment	1,947			1,947
Stationary	213			213
reno	40,000			40,000
Working Capital				
Salaries, EPF & SOC SO		4,411		4,411
Rental		3,000		3,000
Utilities		1,000		1,000
		-		-
		-		-
		-		-
		-		-
Pre-Operations & Other Expenditure				
Other Expenditure			7,150	
Deposit (rent, utilities, etc.)			-	-
Business Registration & Licences			75	75
Insurance & Road Tax for Motor Vehicle			-	-
Other Pre-Operations Expenditure			-	-
Total	44,721	8,411	7,225	53,207

Financial Plan

MARKETING BUDGET				
Particulars	F.Assets	Monthly Exp.	Others	Total
Fixed Assets				
Signboard	750			750
	-			-
	-			-
	-			-
Working Capital				
Utilities		100		100
		-		-
		-		-
		-		-
		-		-
		-		-
		-		-
		-		-
Pre-Operations & Other Expenditure				
Other Expenditure			-	
Deposit (rent, utilities, etc.)			-	-
Business Registration & Licences			-	-
Insurance & Road Tax for Motor Vehicle			-	-
Other Pre-Operations Expenditure			2,700	2,700
Total	750	100	2,700	3,550

Financial Plan

SALES PROJECTION	
Month 1	11,960
Month 2	13,216
Month 3	16,156
Month 4	17,347
Month 5	16,524
Month 6	18,812
Month 7	17,706
Month 8	19,917
Month 9	18,936
Month 10	20,558
Month 11	22,472
Month 12	23,552
Total Year 1	217,156
ToTal Year 2	228,014
Total Year 3	250,815

PURCHASE PROJECTION	
Month 1	39
Month 2	57
Month 3	69
Month 4	72
Month 5	70
Month 6	73
Month 7	71
Month 8	75
Month 9	74
Month 10	78
Month 11	80
Month 12	81
Total Year 1	839
ToTal Year 2	881
Total Year 3	970

Financial Plan

OPERATIONS BUDGET

Particulars	F.Assets	Monthly Exp.	Others	Total
Fixed Assets				
Machinery & Equipment	51305			51,305
				-
				-
				-
Working Capital				
Raw Materials		39		39
Carriage Inward & Duty		-		-
Salaries, EPF & SOCSO		-		-
		-		-
		-		-
		-		-
		-		-
Pre-Operations & Other Expenditure				
Other Expenditure			-	
Deposit (rent, utilities, etc.)			-	-
Business Registration & Licences			-	-
Insurance & Road Tax for Motor Vehicle			-	-
Other Pre-Operations Expenditure			2,524	2,524
Total	51,305	39	2,524	53,868

Financial Plan

Ladies Fitness Gym

DEPRECIATION SCHEDULES

Fixed Asset		Office Furniture	
Cost (RM)		2,561	
Method		Straight Line	
Economic	Life		
(yrs)	5		
Year	Annual Depreciation	Accumulated Depreciation	Book Value
	-	-	2,561
1	512	512	2,049
2	512	1,024	1,537
3	512	1,537	1,024
4	512	2,049	512
5	512	2,561	-

Fixed Asset		Office Equipment	
Cost (RM)		1,947	
Method		Straight Line	
Economic	Life		
(yrs)	5		
Year	Annual Depreciation	Accumulated Depreciation	Book Value
	-	-	1,947
1	389	389	1,558
2	389	779	1,168
3	389	1,168	779
4	389	1,558	389
5	389	1,947	-

Fixed Asset		Stationary	
Cost (RM)		213	
Method		Straight Line	
Economic	Life		
(yrs)	5		
Year	Annual Depreciation	Accumulated Depreciation	Book Value
	-	-	213
1	43	43	170
2	43	85	128
3	43	128	85
4	43	170	43
5	43	213	-

Fixed Asset		Renovation	
Cost (RM)		40,000	
Method		Straight Line	
Economic	Life		
(yrs)	5		
Year	Annual Depreciation	Accumulated Depreciation	Book Value
	-	-	40,000
1	8,000	8,000	32,000
2	8,000	16,000	24,000
3	8,000	24,000	16,000
4	8,000	32,000	8,000
5	8,000	40,000	-

Financial Plan

Fixed Asset		Signboard	
Cost (RM)		750	
Method		Straight Line	
Economic Life (yrs)		5	
Year	Annual Depreciation	Accumulated Depreciation	Book Value
	-	-	750
1	150	150	600
2	150	300	450
3	150	450	300
4	150	600	150
5	150	750	-

Fixed Asset		Machinery & Equipment	
Cost (RM)		51,305	
Method		Straight Line	
Economic Life (yrs)		5	
Year	Annual Depreciation	Accumulated Depreciation	Book Value
	-	-	51,305
1	10,261	10,261	41,044
2	10,261	20,522	30,783
3	10,261	30,783	20,522
4	10,261	41,044	10,261
5	10,261	51,305	-

**Ladies Fitness Gym
PRO FORMA CASH FLOW STATEMENT**

MONTH	Pre-Operations	1	2	3	4	5	6	7	8	9	10	11
CASH INFLOW												
Capital (Cash)	128,553											
Loan	(1)											
Cash Sales		11,960	13,218	16,158	17,347	18,524	18,812	17,708	18,817	18,838	20,568	22,472
Collection of Accounts Receivable												
TOTAL CASH INFLOW	128,553	11,960	13,218	16,158	17,347	18,524	18,812	17,708	18,817	18,838	20,568	22,472
CASH OUTFLOW												
Administrative Expenditure												
Salaries, EPF & SOCSO		4,411	4,411	4,411	4,411	4,411	4,411	4,411	4,411	4,411	4,411	4,411
Rental		3,000	3,000	3,000	3,000	3,000	3,000	3,000	3,000	3,000	3,000	3,000
Utilities		1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
Marketing Expenditure												
Utilities		100	100	100	100	100	100	100	100	100	100	100
Operations Expenditure												
Cash Purchase		36	57	66	72	70	73	71	75	74	78	80
Payment of Account Payable												
Carriage inward & Duty												
Salaries, EPF & SOCSO												
Other Expenditure												
Pre-Operations		7,150										
Deposit (rent, utilities, etc.)												
Business Registration & Licences		75										
Insurance & Road Tax for Motor Vehicle												
Other Pre-Operations Expenditure		5,224										
Fixed Assets												
Purchase of Fixed Assets - Land & Building												
Purchase of Fixed Assets - Others		96,776										
Hire-Purchase Down Payment												
Hire-Purchase Repayment:												
Principal												
Interest												
Loan Repayment:												
Principal		(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)
Interest		(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)
Tax Payable												
TOTAL CASH OUTFLOW	102,075	19,700	8,588	8,580	8,583	8,561	8,584	8,582	8,586	8,585	8,588	8,581
CASH SURPLUS (DEFICIT)	27,478	(3,740)	4,648	7,578	8,764	7,963	10,228	9,124	11,231	10,251	11,988	13,881
BEGINNING CASH BALANCE		27,478	22,738	28,386	35,852	44,726	52,686	62,807	72,021	83,252	93,703	105,672
ENDING CASH BALANCE	27,478	22,738	28,386	35,852	44,726	52,686	62,807	72,021	83,252	93,703	105,672	118,883

Financial Plan

Ladies Fitness Gym PRO-FORMA INCOME STATEMENT

	Year 1	Year 2	Year 3
Sales	217,156	228,014	250,815
Less: Cost of Sales			
Opening stock			
Purchases	839	881	970
Less: Ending Stock			
Carriage Inward & Duty			
Gross Profit			
Less: Expenditure			
Administrative Expenditure	100,932	100,932	100,932
Marketing Expenditure	1,200	1,200	1,200
Other Expenditure	7,150	7,150	7,150
Business Registration & Licences	75		
Insurance & Road Tax for Motor Vehicle			
Other Pre-Operations Expenditure	5,224		
Interest on Hire-Purchase			
Interest on Loan	(0)	(0)	(0)
Depreciation of Fixed Assets	19,355	19,355	19,355
Operations Expenditure			
Total Expenditure	134,775	129,518	129,607
Net Profit Before Tax	82,381	98,496	121,208
Tax	0	0	0
Net Profit After Tax	82,381	98,496	121,208
Accumulated Net Profit	82,381	180,877	302,084

Financial Plan

Ladies Fitness Gym PRO-FORMA BALANCE SHEET

	Year 1	Year 2	Year 3
ASSETS			
Non-Current Assets (Book Value)			
Land & Building			
Office Furniture	2,049	1,537	1,024
Office Equipment	1,558	1,168	779
Stationary	170	128	85
Renovation	32,000	24,000	16,000
Signboard	600	450	300
 Machinery & Equipment	 41,044	 30,783	 20,522
Other Assets			
Deposit			
	77,421	58,066	38,710
Current Assets			
Stock of Raw Materials	0	0	0
Stock of Finished Goods	0	0	0
Accounts Receivable			
Cash Balance	134,513	252,364	392,927
	134,513	252,364	392,927
TOTAL ASSETS	211,933	310,429	431,637
Owners' Equity			
Capital	129,553	129,553	129,553
Accumulated Profit	82,381	180,877	302,084
	211,934	310,430	431,637
Long-Term Liabilities			
Loan Balance	(0)	(0)	(0)
Hire-Purchase Balance			
	(0)	(0)	(0)
Current Liabilities			
Accounts Payable			
TOTAL EQUITY & LIABILITIES	211,933	310,429	431,637

Conclusion

In conclusion, financial plan is the most important plan after all the marketing and operation budget is compiled. There is no other way to escape from the financial plan because it is the most significant final touch up to prevent any errors and difficulties throughout proceeding the business. Moreover, it is also important that the financial management is managed accurately to avoid loss in the business profit. The final account will be normally calculated at the end of the year or equal to the one year of the business activities. Similarly, it is a huge responsibility to the financial manager to ensure that the financial statement is balance.



Fitness Ladies Gym

APPENDIX



KUMPULAN WANG SIMPANAN PEKERJA PANDUAN MENGISI BORANG KWSP 1 BAGI PERMOHONAN PENDAFTARAN MAJIKAN

BORANG INI HENDAKLAH DILENGKAPKAN DENGAN MENGGUNAKAN **PEN DAKWAT HITAM** DAN DITULIS MENGGUNAKAN **HURUF BESAR**.
PANDUAN MENGISI BORANG INI ADALAH MERUJUK KEPADA BAHAGIAN-BAHAGIAN UTAMA DI DALAM BORANG PERMOHONAN

(A) JENIS PENDAFTARAN MAJIKAN

Tandakan (/) salah satu sahaja di dalam ruangan yang disediakan mengikut jenis majikan yang hendak didaftarkan sebagaimana pilihan dan keterangan berikut :-

• Kerajaan

Permohonan daripada pihak Kerajaan Malaysia seperti jabatan atau agensi kerajaan, badan berkanun dan pihak berkuasa tempatan.

• Berdaftar Dengan Suruhanjaya Syarikat Malaysia

Permohonan daripada syarikat yang berdaftar dengan Suruhanjaya Syarikat Malaysia.

• Berdaftar Selain Dengan Suruhanjaya Syarikat Malaysia

Permohonan daripada syarikat yang berdaftar selain dengan Suruhanjaya Syarikat Malaysia.

• Majikan Kepada Orang Gaji Domestik

Permohonan daripada majikan yang menggaji pekerja domestik/tempatan sebagai pekerja seperti pemandu, pembantu rumah dan seumpamanya .

• Lain-Lain

Permohonan daripada badan atau pertubuhan lain seperti Pertubuhan, Persatuan dan Koperasi.

(B) MAKLUMAT MAJIKAN (Tidak Perlu Diisi Bagi Pendaftaran Majikan Orang Gaji Domestik)

Lengkapkan maklumat majikan yang diperlukan di Bahagian (B) sebagaimana keterangan berikut :-

Nama Majikan - Isikan nama penuh majikan sebagaimana dinyatakan di dokumen yang Syarikat/Firma/Persatuan

Nombor Pendaftaran Perniagaan Bagi Syarikat/Firma/Persatuan - Isikan nombor pendaftaran perniagaan syarikat/firma/persatuan/lain-lain

Tarikh Penubuhan - Isi tarikh syarikat/firma/persatuan ditubuhkan

Tarikh Mula Mengambil Pekerja - Isi tarikh mula mengambil pekerja pertama

Entiti Perniagaan - Tandakan (/) pada kotak yang berkenaan berdasarkan Sijil Pendaftaran Syarikat

Jenis Perniagaan - Isikan Jenis Perniagaan berdasarkan pada Sijil Pendaftaran Syarikat

Bilangan Pekerja - Isi/Nyatakan bilangan pekerja yang digaji semasa pendaftaran dibuat

(C) MAKLUMAT PERNIAGAAN - Sila lengkap Bahagian (C) dengan maklumat perniagaan majikan

Alamat Perniagaan - Alamat di mana perniagaan dijalankan.

Alamat Berdaftar - Alamat yang didaftarkan pada Sijil Pendaftaran Syarikat (sekiranya berbeza dengan alamat perniagaan)

Alamat Surat Menyurat - Alamat untuk urusan surat menyurat (sekiranya berbeza dengan alamat perniagaan)

Emel - Alamat emel rasmi perniagaan

Nama Pegawai - Nama pegawai yang bertanggungjawab ke atas urusan KWSP syarikat berkenan

Jawatan - Isi jawatan pegawai yang bertanggungjawab ke atas urusan KWSP

Nombor Telefon 1 & 2 - Isi nombor telefon pegawai yang bertanggungjawab ke atas urusan KWSP

Nombor Telefon Bimbit - Isi nombor telefon bimbit pegawai yang bertanggungjawab ke atas urusan KWSP

Nombor Faksimili - Isi nombor faksimili syarikat

(D) MAKLUMAT PEMILIK / PENGARAH SYARIKAT / RAKAN KONGSI / PEMEGANG JAWATAN UTAMA

Sila lengkap Bahagian (D) dengan maklumat Pemilik / Pengarah Syarikat / Rakan kongsi / Pemegang jawatan utama

Nama - Isi nama Pemilik / Pengarah Syarikat / Rakan kongsi / Pemegang jawatan utama

Jawatan - Isi jawatan Pemilik / Pengarah Syarikat / Rakan kongsi / Pemegang jawatan utama

Nombor KP/Pasport - Isi no. KP/Pasport Pemilik / Pengarah Syarikat / Rakan kongsi / Pemegang jawatan utama

Nombor Ahli KWSP - Isi no. ahli KWSP Pemilik / Pengarah Syarikat / Rakan kongsi / Pemegang jawatan utama **Warganegara** - Isi warganegara Pemilik / Pengarah Syarikat / Rakan kongsi / Pemegang jawatan utama

Tarikh Lantikan - Isi tarikh lantikan Pemilik / Pengarah Syarikat / Rakan kongsi / Pemegang jawatan utama

(E) NAMA DAN ALAMAT TEMPAT PERNIAGAAN LAIN ATAU CAWANGAN

Sila lengkapkan Bahagian (E) dengan maklumat nama dan alamat tempat lain atau cawangan

Nama dan Alamat - Isi alamat surat-menyurat tempat perniagaan lain atau cawangan (jika ada)

(F) MAKLUMAT MAJIKAN ORANG GAJI DOMESTIK

Sila lengkapkan Bahagian (F) dengan maklumat Majikan Orang Gaji Domestik

Nama majikan - Isi nama Majikan Orang Gaji Domestik

Nombor KP/Pasport - Isi nombor KP/Pasport Majikan Orang Gaji Domestik

(G) MAKLUMAT ORANG GAJI DOMESTIK

Sila lengkapkan bahagian G dengan maklumat Orang Gaji Domestik seperti Nama ,No. K/P atau pasport dan tandatangan Orang Gaji Domestik

(H) PENGESAHAN MAJIKAN

Sila turunkan tandatangan majikan / wakil majikan, jawatan , cop rasmi syarikat dan tarikh

SENARAI SEMAKAN DOKUMEN SOKONGAN BAGI PERMOHONAN
PENDAFTARAN MAJIKAN

SEGALA SALINAN DOKUMEN SOKONGAN HENDAKLAH DIBUAT DI DALAM SAIZ A4 DAN PASTIKAN DOKUMEN-DOKUMEN YANG
DISERTAKAN BERSAMA-SAMA DENGAN BORANG PERMOHONAN DIKLIPKAN DAN TIDAK MENGGUNAKAN DAWAI KOKOT (STAPLES).

1.0 DOKUMEN SOKONGAN PERMOHONAN PENDAFTARAN MAJIKAN

- 1.1 Salinan Kad Pengenalan Diri / Polis / Tentera / Pasport. Salinan Kad Pengenalan PERLU dibuat di kedua-dua
bahagian (depan & belakang) di atas sekeping kertas saiz A4
1.2 Salinan dokumen-dokumen sokongan yang dikemukakan PERLU dibuat di atas sekeping kertas saiz A4
1.3 Bagi Permohonan Pendaftaran majikan Awam
1.3.1. Borang KWSP 1
1.3.2. Satu (1) salinan kad pengenalan Pengarah/Ketua Jabatan
1.4. Bagi permohonan Pendaftaran Majikan Swasta/Syarikat Sdn Bhd ATAU Berhad
1.4.1. Borang KWSP 1 (mesti ditandatangani oleh salah seorang Pengarah Syarikat) atau wakilnya
1.4.2. Satu (1) salinan kad pengenalan orang yang menandatangani Borang KWSP 1
1.4.3. Salinan Borang 49 dan Borang 9 Pendaftaran Syarikat
1.4.4. Sila sertakan CEK atau BANK DRAF atas nama KWSP untuk bayaran caruman pertama (jika terdapat
bulan-bulan yang tertunggak, sila jelaskan bayaran sehingga bulan yang terkini bagi majikan yang
mengambil pekerja lebih awal dari tarikh pendaftaran dengan KWSP).
1.5. Bagi permohonan Syarikat Perkongsian ATAU Pemilik Tunggal
1.5.1. Borang KWSP 1 (mesti ditandatangani oleh salah seorang pemilik atau rakan kongsi) atau wakilnya
1.5.2. Satu (1) salinan kad pengenalan orang yang menandatangani Borang KWSP 1
1.5.3. Salinan borang pendaftaran Syarikat (Borang D dan Borang A)
1.5.4. Sila sertakan CEK atau BANK DRAF atas nama KWSP untuk bayaran caruman pertama (jika terdapat
bulan-bulan tertunggak, sila jelaskan bayaran sehingga bulan yang terkini bagi majikan yang mengambil
pekerja lebih awal dari tarikh pendaftaran dengan KWSP).
1.6. Bagi permohonan Pendaftaran Badan Profesional/Pertubuhan/Persatuan/Koperasi dan lain-lain
1.6.1. Borang KWSP 1 (mesti ditandatangani oleh salah seorang pemilik) atau wakilnya
1.6.2. Satu (1) salinan kad pengenalan orang yang menandatangani Borang KWSP 1
1.6.3. Salinan Sijil Pendaftaran Badan Profesional/Pertubuhan/Persatuan/Koperasi dan lain-lain
1.6.4. Senarai keanggotaan Jawatankuasa Badan Profesional/Pertubuhan/Persatuan/Koperasi dan lain-lain
1.7 Bagi permohonan majikan Orang Gaji Domestik:
1.7.1. Borang KWSP 1
1.7.2. Borang KWSP 16 (2 salinan)
1.7.3 Satu (1) salinan kad pengenalan majikan
1.7.4 Satu (1) salinan kad pengenalan pekerja domestik/tempatan

2.0 PERHATIAN : (Anda dinasihatkan untuk membaca dengan teliti arahan di bawah sebelum mengisi borang)

- 2.1 Setiap borang permohonan hendaklah ditulis menggunakan pen berdakwa hitam dengan terang dan jelas dalam
HURUF BESAR.
2.2 Serahan borang di kaunter KWSP, hendaklah di bawa bersama dokumen asal beserta salinan dokumen bagi tujuan
pengesahan oleh Pegawai KWSP (jika belum dibuat pengesahan dokumen)
2.3 Sila pastikan semua salinan dokumen di atas telah disahkan oleh pegawai yang dibenarkan oleh KWSP lengkap
dengan nama, jawatan dan cop rasmi pengesah kecuali bagi salinan dokumen-dokumen yang telah ditetapkan
KWSP sebagai pegawai pengesahnya.

Table with 2 columns: DOKUMEN, NAMA PEGAWAI PENGESAH. Row 1: Salinan Kad Pengenalan, Dokumen-dokumen sokongan; a. Pegawai KWSP yang terdiri daripada - Pegawai KWSP Gred 18 ke atas - Pegawai Kaunter KWSP b. Majikan Pemohon c. Penghulu atau Pengawa d. Jaksa Pendamai e. Kumpulan Pengurusan/Profesional Kerajaan f. Ahli Dewan Undangan Negeri g. Ahli Parlimen h. Pesuruhjaya Sumpah



KWSP
1 (MAJ)
PERCUMA

JENIS PENDAFTARAN MAJIKAN / TYPE OF EMPLOYER REGISTRATION

SILATANDAKAN SALAH SATU SAHAJA / PLEASE TICK ANY OF THE BOXES BELOW

- | | | | |
|--|--------------------------|--|--------------------------|
| 1. KERAJAAN
<i>GOVERNMENT</i> | ☐ | 4. MAJIKAN KEPADA ORANG GAJI DOMESTIK
<i>EMPLOYERS REGISTRATION FOR DOMESTIC SERVANTS</i> | ☐ |
| 2. BERDAFTAR DENGAN SURUHANJAYA SYARIKAT MALAYSIA
<i>REGISTERED WITH COMPANIES COMMISSION OF MALAYSIA</i> | ☐ | 5. LAIN-LAIN
<i>OTHERS</i> | ☐ |
| 3. BERDAFTAR SELAIN DENGAN SURUHANJAYA SYARIKAT MALAYSIA
<i>REGISTERED WITH OTHER THAN COMPANIES COMMISSION OF MALAYSIA</i> | ☐ | | |

NOTE: TO REGISTER EMPLOYER FOR DOMESTIC SERVANTS, PLEASE COMPLETE SECTION (F), (G) AND (H) ONLY.

MAKLUMAT MAJIKAN / EMPLOYER'S DETAILS[illegible][illegible]

			-			-			
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		-			-				
--	--	---	--	--	---	--	--	--	--

LAIN- LAIN
OTHERS

--	--	--	--	--	--

--	--	--	--

--	--	--	--	--

COP TARIKH TERIMA

A PENUH MAJIKAN (HURUF BESAR) _____
 YER'S NAME (CAPITAL LETTER)

MAKLUMAT PERNIAGAAN / BUSINESS DETAILS

ALAMAT PERNIAGAAN
 BUSINESS ADDRESS

POSKOD
 POSTCODE

NEGERI
 STATE

ALAMAT BERDAFTAR
 (SEKIRANYA BERBEZA
 DENGAN
 PERNIAGAAN)
 REGISTERED ADDRESS

POSKOD
 POSTCODE

NEGERI
 STATE

ALAMAT SURAT
 MENYURAT
 MAILING ADDRESS

POSKOD
 POSTCODE

NEGERI
 STATE

E-MEL
 EMAIL

NAMA PEGAWAI
 NAME OF OFFICER

JAWATAN
 DESIGNATION

NO. TELEFON
 1
 TELEPHONE NO. 1

NO. TELEFON BIMBIT
 MOBILE NO

NO. TELEFON
 2
 TELEPHONE NO. 2

NO. FAKSIMILI
 FAX NO

MAKLUMAT PEMILIK / PENGARAH SYARIKAT / RAKAN KONGSI/PEMEGANG JAWATAN UTAMA/ BUSINESSOWNER DETAILS

NAMA
 NAME

JAWATAN
 DESIGNATION

NO. K/P/PASPORT
 IC/PASSPORT
 NO.

WARGANEGARA
 CITIZENSHIP

TARIKH LANTIKAN
 DATE OF APPOINTMENT

NO. AHLI KWSP
 MEMBER'S NO.

NAMA DAN ALAMAT TEMPAT PERNIAGAAN LAIN ATAU CAWANGAN / OTHER BUSINESS OR BRANCH

NAMA NAME	ALAMAT ADDRESS

: JIKA RUANGAN TIDAK MENCUKUPI, SILA SERTAKAN LAMPIRAN BERSAMA PERMOHONAN INI.
 : IF SPACE IS INSUFFICIENT, PLEASE USE SEPARATE ATTACHMENT TOGETHER WITH THIS FORM.

APENUH MAJIKAN (HURUF BESAR) _____
EMPLOYER'S NAME (CAPITAL LETTER)

MAKLUMAT MAJIKAN ORANG GAJI DOMESTIK / EMPLOYER'S DETAILS FOR DOMESTIC SERVANTS APPLICATION

NAMA MAJIKAN EMPLOYER'S NAME																																								
NO. K.P/PASPORT IC/PASSPORT NO																																								
ALAMAT KEDIAMAN/ PERNIAGAAN RESIDENTIAL / BUSINESS ADDRESS																																								
POSKOD POSTCODE						NEGERI STATE																																		
NO. TELEFON RUMAH HOME TELEPHONE NO.																NO. TELEFON PEJABAT OFFICE TELEPHONE NO.																								
NO. TELEFON BIMBIT MOBILE TELEPHONE NO.																NO. FAKSIMILE FAX NO.																								
SAYA SUDAH / BELUM DIDAFTRAKAN SEBAGAI SEORANG MAJIKAN. NO. RUJUKAN MAJIKAN KWSP SAYA IALAH THIS COMPANY REGISTERED / NOT REGISTERED WITH EPF. THE EMPLOYER'S REGISTRATION NO. IS																																			BILANGAN ORANG GAJI DOMESTIK					

MAKLUMAT ORANG GAJI DOMESTIK / DOMESTIC SERVANT DETAILS

NOTA : JIKA RUANGAN TIDAK MENCUKUPI, SILA LENGKAPKAN DAN SERTAKAN PERMOHONAN YANG BERASINGAN.

NAMA ORANG GAJI DOMESTIK DOMESTIC SERVANT NAME																														
NO. K.P/PASPORT IC/PASSPORT NO																														

TANDATANGAN ORANG GAJI DOMESTIK DOMESTIC SERVANTS' SIGNATURE	_____	TARIKH DATE	_____
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PENGESAHAN MAJIKAN / EMPLOYER'S DECLARATION

NOTA : RUANGAN INI PERLU DILENGKAPKAN BAGI SEMUA JENIS PENDAFTARAN MAJIKAN.

SAYA MENGESAHKAN SEMUA MAKLUMAT DAN DOKUMEN YANG DIBERIKAN ADALAH SAH DAN BENAR

I HEREBY CONFIRM THAT ALL THE INFORMATION AND DOCUMENT GIVEN IN THIS APPLICATION IS VALID AND CORRECT.

TANDATANGAN MAJIKAN / WAKIL MAJIKAN EMPLOYER'S SIGNATURE	JAWATAN DESIGNATION	COP RASMI SYARIKAT COMPANY STAMP	TARIKH DATE
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KUMPULAN WANG SIMPANAN PEKERJA PANDUAN MENGISI BORANG KWSP 3 BAGI PERMOHONAN PENDAFTARAN AHLI DAN PINDAAN MAKLUMAT

1. Pemohon dinasihatkan membaca dengan teliti arahan-arahan di dalam panduan ini sebelum mengisi borang.
2. Borang ini hendaklah dilengkapkan dengan menggunakan **PEN DAKWAT HITAM** dan ditulis menggunakan **HURUF BESAR**.
3. Berikut adalah panduan borang bagi bahagian-bahagian utama di dalam borang permohonan (KWSP 3) iaitu :-

(A) **JENIS PERMOHONAN** - Tandakan (/) jenis permohonan yang berkenaan.

(B) **MAKLUMAT PEMOHON** - Lengkapkan dengan maklumat sebagaimana di dalam kad pengenalan atau lain-lain dokumen pengenalan diri pemohon iaitu :-

Nama , Nombor Ahli KWSP (bagi permohonan pindaan maklumat ahli sahaja), Nombor Kad Pengenalan (Baru), Nombor Kad Pengenalan Lama/Polis/Tentera/Pasport, Nombor Sijil Kelahiran/Sijil Warganegara (jika ada/berkaitan) , Tarikh Lahir, Agama , Jantina , Taraf Penduduk, Warganegara dan Nombor Rujukan Majikan (untuk Pendaftaran Ahli sahaja- jika berkaitan).

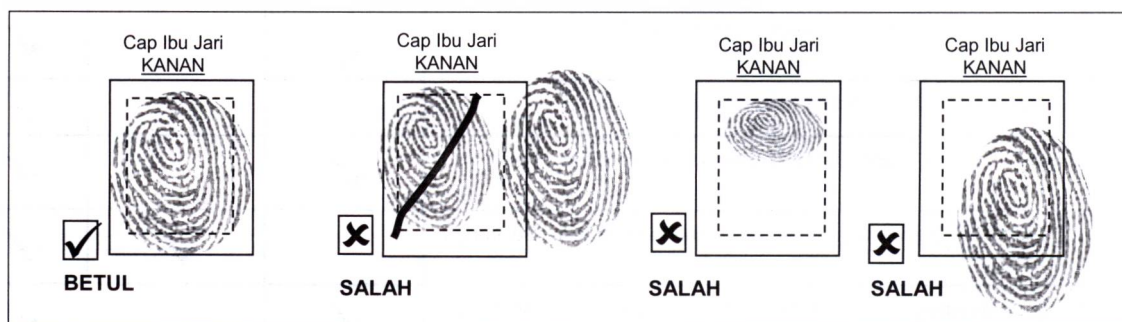
(C) **ALAMAT** -**Alamat Surat-Menyurat dan Alamat Tetap** (alamat tetap tidak perlu diisi jika sama dengan alamat surat-menyurat).

- **Nombor Untuk Dihubungi** - Isikan dengan lengkap nombor telefon rumah, pejabat dan telefon bimbit

- **Saluran Komunikasi** - Tandakan (/) salah satu sahaja di dalam ruang yang disediakan. Sekiranya memilih e-mel, catatkan alamat e-mel di ruang yang disediakan.

(D) PENGESAHAN PEMOHON

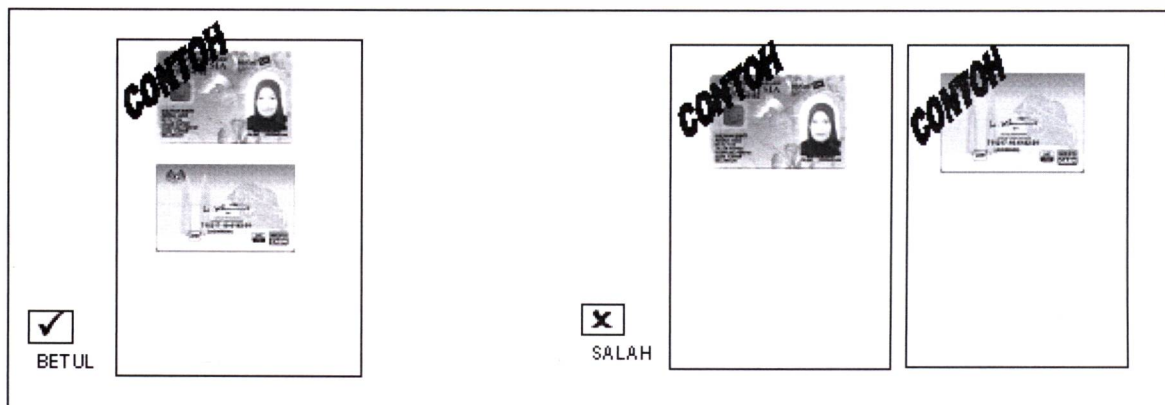
Pemohon dikehendaki menurunkan tandatangan, tarikh permohonan serta cap ibu jari kanan dan kiri. Cap ibu jari mestilah diturunkan dengan terang dan jelas dengan menggunakan pad cap jari berwarna hitam di dalam ruangan yang disediakan seperti panduan di bawah :-



(E) PENGESAHAN SAKSI

Selepas semua maklumat pemohon lengkap diisi dan pemohon telah menurunkan cap jarinya di ruangan yang disediakan, saksi dikehendaki menurunkan tandatangan, nama penuh, nombor kad pengenalan atau pasport, alamat dan nombor telefon bagi pengesahan maklumat dan cap jari pemohon.

4. Semua salinan dokumen sokongan hendaklah dibuat dalam saiz A4 dan pastikan dokumen yang disertakan bersama-sama dengan borang permohonan diklipkan dan tidak menggunakan dawai kokot (stapler).
5. Salinan Kad Pengenalan/Kad Kuasa Polis atau Tentera/Pasport PERLU dibuat kedua-dua bahagiannya (depan & belakang) di atas sekeping kertas saiz A4 pada muka surat yang sama seperti contoh di bawah :-



6. Borang permohonan boleh juga dihantar kepada KWSP melalui pos ke alamat :-

KUMPULAN WANG SIMPANAN PEKERJA
Beg Berkunci No. 220, Jalan Sultan,
46720 Petaling Jaya , Selangor Darul Ehsan.

7. Bagi permohonan melalui pos, semua salinan dokumen sokongan yang dikehendaki perlu disertakan bersama-sama.

8. Dokumen-dokumen sokongan yang diperlukan mengikut jenis permohonan adalah seperti di berikut :-

BIL	DOKUMEN	JENIS PERMOHONAN		
		Pendaftaran Ahli (Malaysia)	Pendaftaran Ahli (Warganegara Asing)	Pindaan Maklumat
1	Borang Permohonan KWSP 3 – satu salinan	✓	✓	✓
2	KWSP 16B – bagi pemohon <u>bukan</u> warganegara Malaysia (2 salinan)		✓	✓
3	Salinan Kad Pengenalan/Kad Kuasa Polis/Tentera dan Surat Pengesahan Kad Pengenalan Awam	✓		✓
4	Surat Pengesahan Majikan (sekiranya perlu)			✓
5	Sijil Kelahiran – sekiranya tidak mempunyai Kad Pengenalan	✓		✓
6	Pasport dan permit kerja yang masih sah tempoh laku (Sekiranya berkaitan)		✓	✓
7	Sijil Warganegara – sekiranya masih belum mendapat kad pengenalan	✓		✓
8	Surat Pengesahan JPN / Cetakan Maklumat MyKad (sekiranya perlu)			✓
9	Surat Pihak Berkuasa Agama bagi ahli beragama Islam, atau surat daripada Pejabat Agama Islam yang diberi kuasa; atau surat Mahkamah Syariah (pindaan nama dan agama sahaja)			✓
10	Surat Sumpah (sekiranya perlu)			✓



KUMPULAN WANG SIMPANAN PEKERJA
PERMOHONAN PENDAFTARAN AHLI DAN PINDAAN MAKLUMAT
APPLICATION FOR MEMBER'S REGISTRATION AND AMENDMENT OF MEMBER'S PARTICULARS

KWSP
3
PERCUMA

(A) JENIS PERMOHONAN / TYPE OF APPLICATION

SILA TANDAKAN (/)
PLEASE TICK (/)

☐ PENDAFTARAN AHLI
MEMBER'S REGISTRATION

☐ PINDAAN MAKLUMAT AHLI
AMENDMENT OF MEMBER'S PARTICULARS

(B) MAKLUMAT PEMOHON / PARTICULARS OF APPLICANT

NAMA
NAME

NO. AHLI KWSP
EPF MEMBERSHIP NUMBER

NO. K/P BARU
NEW IC NO.

(TIDAK PERLU DIISI OLEH PEMEGANG MYKAD)

NO. KP LAMA / POLIS /
TENTERA / PASPORT
OLD IC NO. / POLICE/MILITARY
PASSPORT NO.

NO. SIJIL KELAHIRAN /
SIJIL WARGANEGARA
BIRTH / CITIZENSHIP CERT NO

TARIKH LAHIR
(HH/BB/TTTT)
DATE OF BIRTH (DD/MM/YYYY)

BANGSA
RACE

AGAMA
RELIGION

JANTINA
GENDER

LELAKI
MALE

PEREMPUAN
FEMALE

STATUS
RESIDEN
RESIDENTIAL
STATUS

WARGANEGARA
CITIZEN

BUKAN
WARGANEGARA
NON - CITIZEN

KEWARGANEGARAAN
COUNTRY OF CITIZENSHIP

NO. RUJUKAN MAJIKAN
EPF EMPLOYER NUMBER

(C) ALAMAT / ADDRESS

ALAMAT SURAT-
MENYURAT
CORRESPONDENCE
ADDRESS

POSKOD
POSTCODE

NEGERI
STATE

ALAMAT TETAP
PERMANENT
ADDRESS

POSKOD
POSTCODE

NEGERI
STATE

TELEFON (RUMAH)
TELEPHONE (HOUSE)

(PEJABAT)
(OFFICE)

(BIMBIT)
(MOBILE)

E-MEL
E-MAIL

SALURAN KOMUNIKASI
PREFERRED COMMUNICATION CHANNEL

☐ SURAT
LETTER

☐ E-MEL
E-MAIL

☐ KAUNTER
COUNTER

UNTUK KEGUNAAN
KWSP SAHAJA
FOR EPF USE ONLY

COP TARIKH
TERIMA

(E) PENGESAHAN SAKSI / WITNESS CONFIRMATION

SAYA DENGAN INI MENGESAHKAN KENYATAAN
YANG TELAH DIBUAT OLEH PEMOHON DAN CAP
IBU JARINYA TELAH DITURUNKAN DI HADAPAN
SAYA ADALAH SAH DAN BENAR.

I HEREBY CONFIRM THE INFORMATION ABOVE ARE VALID AND
CORRECT AND I DECLARE THAT THE AFFIXED THUMB
IMPRESSION ON THIS APPLICATION FORM BELONGS TO THE
APPLICANT

(D) PENGESAHAN PEMOHON / APPLICANT'S CONFIRMATION

1. SAYA MENGAKU DAN MENGESAHKAN SEMUA MAKLUMAT DAN DOKUMEN YANG
DIBERIKAN ADALAH BENAR.
 2. SAYA DENGAN INI MENURUNKAN CAP IBU JARI KIRI DAN KANAN DI ATAS
BORANG INI DAN MENGAKU BAHAWA IA ADALAH MILIK SAYA.
- I CONFIRM THE ABOVE INFORMATION AND DOCUMENT ARE CORRECT. I HEREBY AFFIXED MY LEFT AND
RIGHT THUMBPRINT ON THIS APPLICATION FORM AND I DECLARE THAT THE AFFIXED THUMB
IMPRESSION BELONGS TO ME

TANDATANGAN PEMOHON
APPLICANT'S SIGNATURE

TARIKH PERMOHONAN:
DATE OF APPLICATION

CAP IBU JARI AHLI
KIRI
LEFT THUMB PRINT

CAP IBU JARI AHLI
KANAN
RIGHT THUMB PRINT

Butir-butir Perniagaan (Particular Of Business)

Nama Perniagaan (Name of Business) _____

Alamat Pos (Postal address) _____

Butir-butir pemilik / ahli kongsi (Particular of Proprietor / partners)

2.1	Nama Penuh (Name in full)				
2.2	No. K.P. (I. C. No.) Baru (New) Lama (Old)				
2.3	Kadar Milik Syer (Propretional Share)				
2.4	Alamat Sendiri (Personal Address)				
2.5	No Fail Cukai Pendapatan (Income Tax No.)				
2.6	Butir-butir Suami, jika berkenaan (Particular of Husband, if applicable)				
2.6.1.	Nama Penuh (Name in full)				
2.6.2.	No. K.P. (I.C. No.)				
2.6.3.	No. Fail Cukai Pendapatan (Income Tax No.)				
2.6.4.	Pekerjaan (Occupation)				
	Tandatangan (Signature) ..				

3) Tempat Perniagaan
(Place of Business) _____

4) Jenis Perniagaan
(Nature of Business) _____

5) Tarikh Permulaan Perniagaan
(Date of Commencement) _____

Office Of The Registrar Of Business Names / Collector Of Trading Licence, Kuching District
Land Revenue Board Of Malaysia, Kuching Branch.
Level 2, Wisma HASiL, Jalan Padungan, 93100 Kuching.

tel: 082-223400

Fax : 082-244475

Guideline On Application Of Business Names Registration And Trading Licences

Any person, residing in Sarawak (an individual holding visit/social/work pass NOT QUALIFY), intending to register a business under the Business Names Ordinance (Chapter 64 Laws Of Sarawak) and subsequently apply for a trading licence under the Business, professional & Licensing Ordinance (Chapter 33 Laws Of Sarawak) in the District of Kuching is required to observe the following procedures and

1. Seek the **office's approval** for the use of the proposed **business name**.

(name having "HORNBILL / SARAWAK / KING / QUEEN / PRINCE / STATE / NATIONAL / ASEAN / INTERNATIONAL / COLLEGE / CLUB / INSTITUTE / PARTY / FINANCE / LEASING / TRUST / INVESTMENT / INSURANCE / ETC " in them and names that are offensive to members of the public, misleading as to the identity and purpose of the firm are not acceptable.)

2. Upon clearance, proceed on to make the official rubber stamp of the business. **HOME / RESIDENTIAL ADDRESS ARE NOT ALLOWED TO USE AS THE BUSINESS ADDRESS.**

(The rubber stamp should contain such basic information as the name and address of the business.)

The following duly completed application form (distributed free) and documents are **REQUIRED** :

- 3.1 THE BUSINESS NAME Ordinance Registration forms (R.20)(Preferably typewritten, however, R 20 written in **BLOCK LETTERS USING BLACK BALLPOINT PEN** may **BE ACCEPTABLE** if **properly written**.
- 3.2 Application For Trading Licence-Borang 2 (I.R.D. No. 8) zx.
- 3.3 Census of Licensed Trading Establishment (Form TL-from the Statistics Department.)
- 3.4 Information On Particulars of a business (BNR R.20 (KG/IV).
- 3.5 To produce **Certified true copy** of permits / licences / approvals from the respective authorities if your line of business is controlled, monitored or comes under the jurisdiction of other authorities.
- 3.6 Certified true copy of the relevant academic certificates / practicing certificates (especially for professional or consulting firms.)
- 3.7 **ORIGINAL & PHOTOCOPY** of **IDENTITY CARD** of the **APPLICANTS**.
 - (age limit
 - only individual aged 21 years and above may register as sole-proprietor of the business.
 - Individual aged 18 and above but below 21 years may become co-partner of a partnership in which one of the partner must be aged 21 years and above.

3. The **applicants** are required to **appear in person during the registration process to affix their signatures** on the registration form (R20) **in front of the registration clerk**. Submission of these forms, however, may also be done by a representative or agent if the affixed signatures have been duly witnessed by a notary public (lawyer/accountants/commission of oaths or community leaders) beforehand.

4. The following charges will be imposed. Payments should **PREFERABLY BE IN CASH**.

- | | | |
|-----|---------|---|
| 5.1 | RM50.00 | Being Registration Fee. |
| 5.2 | RM25.00 | Being annual licence fee for each Trading Licence applied for |
| 5.3 | RM 2.00 | For an extract of Business Registration. |

5. Registration times are fixed as follows :

MONDAY TO THURSDAY	:	08.00 AM TO 12.15 PM / 02.00 PM TO 03.30 PM
FRIDAY	:	08.00 AM TO 11.15 AM / 02.15 PM TO 03.30 PM

The acceptance of the above registration forms and payments of the fees thereon does not necessarily meant that your form has been duly registered. The registrar reserves the right to accept or reject any submission which, to his mind, does not conform to procedure. You will be informed of this if it happens so that amendments could be made. For this purpose, all applicants must avail contact telephone numbers.

The **registration process** usually takes about **10 working days** from the date registration. Applicants are to call back at this office at a specified date to collect their business registration certificates and trading licences.

Trading licences must be renewed annually. Upon cessation of business, written notice, to be signed by the proprietor or all the co-partners of partnership, together with the certificate of registration and trading licences must be forwarded to the registrar for cancellation.



Suitt selepas data diisi
Confidential when filled with data

BANCI PERTUBUHAN-PERTUBUHAN BERNIAGA YANG BERLESEN
CENSUS OF LICENSED TRADING ESTABLISHMENT

1. BUTIR-BUTIR LESEN (PARTICULARS OF LICENSE)

1. Tahun bagi lesen yang dipohon:
Year for which license is applied: _____
2. Tarikh lesen didaftar:
Date of License Registration: _____
3. (i) Nombor Pendaftaran Perniagaan: _____ (ii) Lesen Baru ☐ (iii) Pembaharuan ☐
Business Registration No.: _____ New License Renewal
4. Nama Pemilik Lesen :
Name of Licensee : _____
5. Nama Perniagaan/Syarikat:
Name of Business/Company: _____
6. Nombor Telefon: _____ 7. Nombor Faks: _____ 8. Alamat E-mel: _____
Telephone Number: Fax Number: E-mail Address: _____
9. Alamat tempat perniagaan (Nombor kedai/Lot>Nama Bangunan/Jalan/Kampung/Bandar/Poskod dll.):
Business Address (Shop Number/Lot/Name of Building/Road/Village/Town/Postcode ect.): _____
- (i) ☐ Alamat Lama, sila nyatakan:
Former address, please specify: _____
- (ii) ☐ Alamat Baru, sila nyatakan :
New address, please specify: _____
10. Alamat Pos Perniagaan (Sekiranya berbeza dengan alamat di atas):
Postal Address (If differ from address above) : _____

2. BUTIR-BUTIR PERNIAGAAN (BUSINESS PARTICULARS)

- a) Sila tandakan (✓) pada kotak yang berkaitan dengan bidang/sektor perniagaan tuan. Sila tandakan satu kotak sahaja.
Please tick (✓) in the appropriate box which refer to your main business activity. Please tick one box only.

- | | | |
|---|---|---|
| ☐ Pertanian
Agriculture | ☐ Perniagaan Runcit
Retail | ☐ Komputer & Aktiviti Berkaitan
Computer & Related Activity |
| ☐ Perlombongan
Mining | ☐ Restoran
Restaurant | ☐ Pembuatan
Manufacturing |
| ☐ Penggalian Batu
Quarrying | ☐ Penginapan
Accommodation | ☐ Pendidikan
Education |
| ☐ Pembinaan
Construction | ☐ Pengangkutan
Transportation | ☐ Perkhidmatan Profesional
Professional Services |
| ☐ Perniagaan Borong
Wholesale | ☐ Pos/Telekomunikasi
Post/Telecommunication | ☐ Perkhidmatan Kesihatan
Health Service |
| ☐ Lain-lain (sila nyatakan)
Others (please specify) _____ | | |

- b) Sila terangkan dengan jelas aktiviti perniagaan utama anda (Please describe your main business activity)

Saya mengaku kenyataan di atas adalah benar mengikut pengetahuan dan pendapat saya
I declare the above statement is true to the best of my knowledge and belief.

Nama: _____ Name: _____	Tandatangan: _____ Signature: _____
Jawatan: _____ Designation: _____	
Tarikh: _____ Date: _____	Cop Perniagaan: Business Stamp: _____

Jika anda menghadapi kesulitan dalam pengisian borang ini, sila hubungi Jabatan Perangkaan Malaysia yang terdekat seperti di bawah:-

Should you encounter any difficulties in filling this form, please contact the nearest Department of Statistics as follows:-

- | | | |
|--------------------------|-------------------------|--------------------------|
| (i) Kuching 082-573472 | (iv) Sarikei 084-651019 | (vii) Bintulu 086-331918 |
| (ii) Sri Aman 083-321355 | (v) Miri 085-442388 | (viii) Kapit 084-797833 |
| (iii) Sibul 084-333690 | (vi) Limbang 085-213343 | |

PANDUAN ARAHAN BAGI SOAL SELIDIK TL

(Pemohon adalah diwajibkan mengisi semua soalan yang berkenaan)

Blok 1 (Butir-Butir Lesen)

1. Tuliskan tahun bila permohonan lesen dibuat
2. Tarikh lesen tuan didaftarkan
3. (i) Sila nyatakan nombor pendaftaran perniagaan
(ii) Sila tandakan (✓) sekiranya memohon lesen baru
(iii) Sila tandakan (✓) sekiranya membaharui lesen
4. Nama pemilik lesen tersebut.
5. Nyatakan nama syarikat yang memohon/membaharui lesen tersebut
6. Nyatakan nombor telefon pejabat/rumah ataupun telefon bimbit
7. Nyatakan nombor faksimili
8. Nyatakan alamat e-mel
9. Nyatakan alamat lengkap tempat tuan menjalankan perniagaan atau alamat syarikat tuan
(i) Sila tandakan (✓) sekiranya menggunakan alamat lama dan nyatakan
(ii) Sila tandakan (✓) sekiranya menggunakan alamat baru dan nyatakan
10. Nyatakan alamat pos perniagaan sekiranya berbeza dengan alamat tempat tuan menjalankan perniagaan tuan.

Blok 2 (Butir-Butir Perniagaan)

- a) Sila tandakan (✓) pada kotak yang sesuai berkenaan dengan bidang perniagaan yang dijalankan oleh pihak tuan.
Sila tandakan SATU kotak sahaja.

- b) Sila terangkan dengan jelas aktiviti perniagaan utama yang telah ditandakan (✓) pada bahagian (a) di atas. Contohnya;

Sekiranya pada kotak Komputer & Aktiviti berkaitan ditandakan (✓) maka pada bahagian (b) boleh dinyatakan tentang aktiviti yang dijalankan contohnya
'menjual komputer atau membaiki komputer dan sebagainya'

Blok 3

Pengakuan kenyataan bahawa segala keterangan yang dibuat adalah betul

Blok 4

Nombor telefon semua Pejabat Operasi Jabatan Perangkaan Malaysia di seluruh Sarawak sekiranya pihak tuan menghadapi masalah untuk mengisi borang ini



No.
Kod
dar

A) PEN

Say

No.

seba

.....

deng

Akta

Tari

B) PEN

Say

No. l

*maji

(Nam

deng

Akta

.....

Tanda

Nama

Tarikh

Nama

.....

.....

No. Te

No. Fa

Alamat



BORANG 1A
PEMBERHENTIAN SEBAGAI MAJIKAN
PERATURAN-PERATURAN (AM) KESELAMATAN SOSIAL PEKERJA 1971
(Peraturan 11A)

BORANG 1A - PEMBERHENTIAN SEBAGAI MAJIKAN

Nombor Pendaftaran (No. SSM/MyCoID, Badan Professional, Pertubuhan, Persatuan, Koperasi) atau

Nombor Pengenalan Diri Majikan (yang tidak berdaftar dengan SSM dan agensi lain) atau

Nombor PTJ Kerajaan Persekutuan atau Kerajaan Negeri

NOMBOR KOD MAJIKAN

A. MAKLUMAT PERUSAHAAN

A1. Nama
Perusahaan

A2. Alamat surat-menyurat

Poskod

Negeri

Peti Surat

No. Beg Berkunci

WDT

(Bagi Sabah/Sarawak)

A3. Alamat Perusahaan (Tidak perlu diisi jika alamat adalah sama seperti di A2)

Poskod

Negeri

Peti Surat

No. Beg Berkunci

WDT

(Bagi Sabah/Sarawak)

A4. Perusahaan ini *akan/telah (*potong mana yang tidak berkenaan) berhenti daripada menjadi majikan di bawah Akta Keselamatan Sosial Pekerja 1969. Sila lengkapkan maklumat yang berkenaan:

☐ Tutup Sementara / Tiada pekerja mulai dari sehingga

☐ Tamat perusahaan mulai dari.....

B. PENGESAHAN MAJIKAN / WAKIL MAJIKAN

Saya dengan ini mengesahkan bahawa maklumat di atas adalah benar sepanjang pengetahuan dan kepercayaan saya.

Tandatangan : _____

Nama:

Tarikh:

(Pengarah Syarikat/Setiausaha Syarikat/Tuan Punya
Tunggal/RakanKongsi/Pengerusi/Wakil Yang Diberikuasa
Secara Bertulis)

*Potong mana yang tidak berkenaan

No. KPPN:

Jawatan:

No. Telefon Pejabat / No. Telefon Bimbit:

No. Faks:

E-mel:

Tandatangan tidak diperlukan sekiranya borang ini dihantar melalui medium elektronik tertakluk kepada pengesahan oleh PERKESO

No. Kod Majikan										No. MyCoID / No. Pendaftaran Perniagaan										Amaun Caruman (RM)									
maun caruman di atas hendaklah dibayar kepada PERKESO/EJEN PEMUNGUT yang dilantik nama dan Alamat Majikan																													
															Lembaran					Bil. Pekerja									
															Kegunaan Ejen Pemungut														
															Cop														
															No. Slip Bayaran														

[illegible]

kedatangan _____
 ma _____
 . Tel & _____
 p Majikan _____

[illegible]

PANDUAN MENGISI BORANG 8B

Caruman gaji bulan. Contoh 06 2012.

No. Kod Majikan.

No. MyCoID.

Jumlah keseluruhan amaun caruman yang perlu dibayar.

Jumlah keseluruhan bilangan pekerja.

Bilangan lembaran seperti contoh berikut:

- 1/2 di lembaran 1
- 2/2 di lembaran 2

Cop Cawangan Ejen Pemungut.

No Slip Bayaran - Diisi oleh Ejen Pemungut berdasarkan nombor slip bayaran yang digunakan untuk membayar caruman.

Ruangan:

- (1): Pekerja baru – Isikan Tarikh Mula Kerja @ Pekerja Berhenti – Isikan Tarikh Berhenti Kerja.

NOTA:

*Majikan perlu kemaskini profil pekerja baru dalam Borang 2 menerusi skrin kemaskini majikan/pekerja dalam PORTAL.

*Pekerja yang telah dibayar carumannya sebelum ini dan kini bergaji melebihi RM3000 sebulan hendaklah terus dicarumkan dengan PERKESO. 'Prinsip Sekali Layak Terus Layak' adalah terpakai dan Notis Pilihan tidak perlu dikemukakan bagi pekerja sedemikian.

*Majikan bagi pekerja baru yang bergaji melebihi RM3000 sebulan dan belum pernah mencarum dengan PERKESO perlu mengemukakan Borang 2 dan Notis Pilihan yang lengkap ditandatangani. Pekerja berkenaan adalah layak mencarum dari tarikh Notis Pilihan lengkap diterima oleh PERKESO.

- (2): Status Pekerja (M-Meninggal Dunia, B-Pekerja Baru, H-Berhenti, S-Cuti Sakit dalam tempoh menerima faedah PERKESO, T-Pekerja yang mengambil cuti tanpa gaji sebulan bagi bulan carum).
- (3): No Kad Pengenalan @ sekiranya tiada, isikan Nombor Keselamatan Sosial yang dibekalkan oleh PERKESO.
- (4): Nama pekerja mengikut kad pengenalan @ Kad Keselamatan Sosial.
- (5): Amaun caruman
 - Skim 1 (Bencana Pekerjaan dan Pencen Ilat): Amaun caruman = syer majikan + syer pekerja.
 - Skim 2 (Bencana Pekerjaan): Amaun caruman = syer majikan sahaja.
 Sila Rujuk Jadual Caruman PERKESO semasa membuat potongan gaji pekerja.

. Jumlah amaun caruman bagi setiap muka surat.

. Nama, tandatangan, no telefon dan cop majikan diisi pada setiap lembaran.

. Kaedah Pembayaran: Cek - catatkan nama bank pembayar. Lain-lain – catatkan jenis kaedah bayaran.

Tandatangan

- (1) Bayaran caruman pada setiap keping cek/kiriman wang/deraf bank hendaklah sama dengan jumlah besar di Borang 8B bagi setiap bulan carum.
- (2) Bayaran menggunakan POSTDATED cek adalah TIDAK DIBENARKAN.
- (3) Penerimaan tunai hanya dibenarkan di kaunter bank sahaja.

PERHATIAN

1. Sila pastikan tulisan/angka/cop majikan/ cop cawangan ejen pemungut tidak menyentuh mana-mana garisan atau kotak yang disediakan. Cop majikan/ cop cawangan ejen pemungut hanya dibenarkan diruangan yang disediakan sahaja.
2. Sila layari laman web <http://www.perkeso.gov.my> untuk maklumat terperinci cara mengisi borang 8A atau hubungi Pusat Khidmat Pelanggan PERKESO di talian 1-300-228000.
3. Slip Bayaran Bank dan salinan Borang 8A perlu disimpan oleh majikan untuk tujuan rekod.

PANDUAN BORANG 2

1) Di ruangan (1), sila pilih jenis kad pengenalan yang dimiliki oleh pekerja dengan memasukkan kod seperti di bawah :

Bil.	Jenis Kad Pengenalan	Kod
1	KPPN Baru	B
2	KPPN Lama	L
3	Kad Pengenalan Tentera	T
4	Kad Pengenalan Polis	P
5	Penduduk Tetap	PR
6	Nombor Keselamatan Sosial	SSN

Pekerja yang tidak memiliki kad pengenalan seperti di atas, dikehendaki datang sendiri ke pejabat PERKESO yang berdekatan untuk pendaftaran Nombor Keselamatan Sosial (SSN) . Permohonan hendaklah dibuat dengan mengemukakan gambar terkini berukuran passport dan dan apa-apa dokumen sokongan yang mengesahkan kewarganegaraan pekerja (cth : sijil kelahiran pekerja, sijil perkahwinan ibu bapa, surat pengesahan dari ketua rumah panjang).

2) Di ruangan (6), sila pilih salah satu kod bangsa seperti berikut :

Bil.	KOD	KETERANGAN
1	01	Melayu
2	02	Cina
3	03	India
4	04	Bumiputera Sabah
5	05	Bumiputera Sarawak
6	06	Lain-lain

3) Di ruangan (9), tandakan (/) hanya kepada pekerja yang pertama kali mencarum dengan PERKESO.

4) Di ruangan B : Hendaklah dilengkapkan oleh majikan / Wakil majikan yang diberi kuasa.

		JENIS PERTAMA: BENCANA P'KERJAAN DAN ILAT (UNTUK BAWAH 60 TAHUN)			JENIS KEDUA BENCANA P'KERJAAN SHJ (UTK LEBIH 60 TAHUN)
GAJI BULANAN	RM	SYER MAJIKAN	SYER PEKERJA	JUMLAH CARUMAN	JUMLAH CARUMAN OLEH MAJIKAN SAHAJA
Gaji serendah	30	0.40	0.10	0.50	0.30
Apabila gaji melebihi tetapi tidak melebihi	30 50	0.70	0.20	0.90	0.50
Apabila gaji melebihi tetapi tidak melebihi	50 70	1.10	0.30	1.40	0.80
Apabila gaji melebihi tetapi tidak melebihi	70 100	1.50	0.40	1.90	1.10
Apabila gaji melebihi tetapi tidak melebihi	100 140	2.10	0.60	2.70	1.50
Apabila gaji melebihi tetapi tidak melebihi	140 200	2.95	0.85	3.80	2.10
Apabila gaji melebihi tetapi tidak melebihi	200 300	4.35	1.25	5.60	3.10
Apabila gaji melebihi tetapi tidak melebihi	300 400	6.15	1.75	7.90	4.40
Apabila gaji melebihi tetapi tidak melebihi	400 500	7.85	2.25	10.10	5.60
Apabila gaji melebihi tetapi tidak melebihi	500 600	9.65	2.75	12.40	6.90
Apabila gaji melebihi tetapi tidak melebihi	600 700	11.35	3.25	14.60	8.10
Apabila gaji melebihi tetapi tidak melebihi	700 800	13.15	3.75	16.90	9.40
Apabila gaji melebihi tetapi tidak melebihi	800 900	14.85	4.25	19.10	10.60
Apabila gaji melebihi tetapi tidak melebihi	900 1,000	16.65	4.75	21.40	11.90
Apabila gaji melebihi tetapi tidak melebihi	1,000 1,100	18.35	5.25	23.60	13.10
Apabila gaji melebihi tetapi tidak melebihi	1,100 1,200	20.15	5.75	25.90	14.40
Apabila gaji melebihi tetapi tidak melebihi	1,200 1,300	21.85	6.25	28.10	15.60
Apabila gaji melebihi tetapi tidak melebihi	1,300 1,400	23.65	6.75	30.40	16.90
Apabila gaji melebihi tetapi tidak melebihi	1,400 1,500	25.35	7.25	32.60	18.10
Apabila gaji melebihi tetapi tidak melebihi	1,500 1,600	27.15	7.75	34.90	19.40
Apabila gaji melebihi tetapi tidak melebihi	1,600 1,700	28.85	8.25	37.10	20.60
Apabila gaji melebihi tetapi tidak melebihi	1,700 1,800	30.65	8.75	39.40	21.90
Apabila gaji melebihi tetapi tidak melebihi	1,800 1,900	32.35	9.25	41.60	23.10
Apabila gaji melebihi tetapi tidak melebihi	1,900 2,000	34.15	9.75	43.90	24.40
Apabila gaji melebihi tetapi tidak melebihi	2,000 2,100	35.85	10.25	46.10	25.60
Apabila gaji melebihi tetapi tidak melebihi	2,100 2,200	37.65	10.75	48.40	26.90
Apabila gaji melebihi tetapi tidak melebihi	2,200 2,300	39.35	11.25	50.60	28.10
Apabila gaji melebihi tetapi tidak melebihi	2,300 2,400	41.15	11.75	52.90	29.40
Apabila gaji melebihi tetapi tidak melebihi	2,400 2,500	42.85	12.25	55.10	30.60
Apabila gaji melebihi tetapi tidak melebihi	2,500 2,600	44.65	12.75	57.40	31.90
Apabila gaji melebihi tetapi tidak melebihi	2,600 2,700	46.35	13.25	59.60	33.10
Apabila gaji melebihi tetapi tidak melebihi	2,700 2,800	48.15	13.75	61.90	34.40
Apabila gaji melebihi tetapi tidak melebihi	2,800 2,900	49.85	14.25	64.10	35.60
Apabila gaji melebihi	2,900	51.65	14.75	66.40	36.90

mbayaran caruman juga boleh dibuat melalui panel bank PERKESO: MBB,RHB,PBB

PERATURAN - PERATURAN (AM) KESELAMATAN SOSIAL PEKERJA 1971 (PER. 44A)

CARUMAN GAJI BULAN

1	2
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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
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bulan

tahun

BORANG 8A

No. Kod Majikan	No. MyCOLD / No. Pendaftaran Perniagaan	Amaun Caruman (RM)

Amaun caruman di atas hendaklah dibayar kepada PERKESO/EJEN PEMUNGUT tidak lewat daripada

Nama dan Alamat Majikan	Lembaran	Bil. Pekerja
	Kegunaan Ejen Pemungut	
	Cop	
	No. Slip Bayaran	

[illegible]

Jumlah muka surat ini

						.		
--	--	--	--	--	--	---	--	--

Andatangan

nama _____

o. Tel &

Top Majikan

Kaedah Pembayaran (Sila tandakan (x))

☐ Tunai☐ Kiriman Wang☐ Cek☐ Lain-lain

No. Cek / Kiriman Wang

[illegible]

PANDUAN MENGISI BORANG 8A

aruman gaji bulan. Contoh 06 2012.

b. Kod Majikan.

b. MyCoID.

mlah keseluruhan amaun caruman yang perlu dibayar.

mlah keseluruhan bilangan pekerja.

angan lembaran seperti contoh berikut:

1/2 di lembaran 1

2/2 di lembaran 2

op Cawangan Ejen Pemungut.

o Slip Bayaran - Diisi oleh Ejen Pemungut berdasarkan nombor p bayaran yang digunakan untuk membayar caruman.

uang:

(1): Pekerja baru – Isikan Tarikh Mula Kerja @
Pekerja Berhenti – Isikan Tarikh Berhenti Kerja.

NOTA:

***Majikan perlu kemaskini profil pekerja baru dalam Borang 2
menerusi skrin kemaskini majikan/pekerja dalam P'ORTAL.**

Pekerja yang telah dibayar carumannya sebelum ini dan kini bergaji melebihi RM3000 sebulan hendaklah terus dicarumkan dengan PERKESO. 'Prinsip Sekali Layak Terus Layak' adalah terpakai dan Notis Pilihan tidak perlu dikemukakan bagi pekerja sedemikian.

Majikan bagi pekerja baru yang bergaji melebihi RM3000 sebulan dan belum pernah mencarum dengan PERKESO perlu mengemukakan Borang 2 dan Notis Pilihan yang lengkap ditandatangani. Pekerja berkenaan adalah layak mencarum dari tarikh Notis Pilihan lengkap diterima oleh PERKESO.

(2): Status Pekerja (M-Meninggal Dunia, B-Pekerja Baru, H-Berhenti, S-Cuti Sakit dalam tempoh menerima faedah PERKESO, T-Pekerja yang mengambil cuti tanpa gaji sebulan bagi bulan carum).

(3): No Kad Pengenalan @ sekiranya tiada, isikan Nombor Keselamatan Sosial yang dibekalkan oleh PERKESO.

(4): Nama pekerja mengikut kad pengenalan @ Kad Keselamatan Sosial.

(5): Amaun caruman

- Skim 1 (Bencana Pekerjaan dan Pencen Ilat): Amaun caruman = syer majikan + syer pekerja.
- Skim 2 (Bencana Pekerjaan): Amaun caruman = syer majikan sahaja.

Sila Rujuk Jadual Caruman PERKESO semasa membuat potongan gaji pekerja.

Jumlah amaun caruman bagi setiap muka surat.

Nama, tandatangan, no telefon dan cop majikan diisi pada setiap lembaran.

Kaedah Pembayaran: Cek - catatkan nama bank pembayar. Lain-lain – catatkan jenis kaedah bayaran.

tan

- 1) Bayaran caruman pada setiap keping cek/kiriman wang/deraf bank hendaklah sama dengan jumlah besar di Borang 8A bagi setiap bulan carum.
- 2) Bayaran menggunakan POSTDATED cek adalah TIDAK DIBENARKAN.
- 3) Penerimaan tunai hanya dibenarkan di kaunter bank sahaja.

PERHATIAN

1. Sila pastikan tulisan/angka/cop majikan/ cop cawangan ejen pemungut tidak menyentuh mana-mana garisan atau kotak yang disediakan. Cop majikan/cop cawangan ejen pemungut hanya dibenarkan diruangan yang disediakan sahaja.
2. Sila layari laman web <http://www.perkeso.gov.my> untuk maklumat terperinci cara mengisi Borang 8A atau hubungi Pusat Khidmat Pelanggan PERKESO di talian 1-300-228000.
3. Slip Bayaran Bank dan salinan Borang 8A perlu disimpan oleh majikan bagi tujuan rekod.

[illegible]



SENARAI SEMAK PENDAFTARAN PERUSAHAAN BARU

1. Sila isi dan lengkapkan borang-borang berikut:
 - i. Borang Pendaftaran Majikan (Borang 1) – 3 salinan
 - ii. Borang Pendaftaran Pekerja (Borang 2) – 2 salinan
2. Sila sertakan salinan dokumen seperti berikut:
 - a. **Sendirian Berhad, Berhad, Ketuanpunyaan Tunggal, Perkongsian, Perkongsian Liabiliti Terhad (PLT), Perwakilan/Kedutaan, Pertubuhan, Persatuan, Koperasi, Badan-Badan Profesional dan Organisasi Bukan Kerajaan (NGO).**
 - i. Kad Pengenalan/Pasport – 1 salinan.
(Pengarah Urusan / Pemilik / Rakan Kongsi)
 - ii. Kad Pengenalan pekerja yang didaftar – 1 salinan.
 - iii. Dokumen tambahan berdasarkan entiti perniagaan (Rujuk senarai dokumen tambahan).
 - iv. Surat Akuan Majikan sekiranya wakil majikan datang mengemukakan permohonan pendaftaran di kaunter PERKESO (Rujuk contoh Surat Akuan Majikan).
 - b. **Kerajaan Persekutuan dan Negeri, Badan-Badan Berkanun, Pihak Berkuasa Tempatan.**
 - i. Kad Pengenalan pekerja yang didaftar – 1 salinan.
 - iii. Dokumen tambahan berdasarkan entiti perniagaan (Rujuk senarai dokumen tambahan).
 - iv. Surat pengesahan daripada agensi sekiranya wakil majikan datang mengemukakan permohonan pendaftaran di kaunter PERKESO.

PANDUAN BORANG I

PANDUAN MENGISI BORANG:	
1. Sila masukkan No. Pendaftaran yang berkaitan di ruangan atas.	c) Bahagian A.9 - Sila tandakan (/) salah satu kaedah bayaran caruman.
2. Badan Berkanun dan Pihak Berkuasa Tempatan, Perwakilan dan Kedutaan perlu membuat pendaftaran di kaunter PERKESO.	4. PENGESAHAN MAJIKAN : Bahagian B hendaklah dilengkapkan oleh majikan / wakil majikan yang diberikuasa.
3. MAKLUMAT PERUSAHAAN:	5. Tandatangan tidak diperlukan sekiranya borang ini dihantar melalui medium elektronik tertakluk kepada pengesahan yang ditetapkan oleh PERKESO.
a) Bahagian A8.1 sila tandakan (/) salah satu jenis entiti perniagaan yang berkaitan. Sekiranya memilih Ketuanpunyaan Tunggal atau Perkongsian tandakan (/) salah satu Jenis Ketuanpunyaan Tunggal atau Perkongsian tersebut.	
b) Bahagian A8.2 - Sila nyatakan entiti yang terlibat seperti yang disenaraikan.	

SENARAI DOKUMEN TAMBAHAN YANG DIPERLUKAN BAGI A8.1 ATAU A8.2

BIL	ENTITI PERNIAGAAN	DOKUMEN YANG DIPERLUKAN
1.	i) Syarikat Sdn Bhd ii) Berhad	- Borang 9 (Akta Syarikat 1965) - Perakuan Pemerbadanan Syarikat Sendirian - Borang 8 (Akta Syarikat 1965) - Perakuan Pemerbadanan Syarikat Awam - Borang 49 (Akta Syarikat 1965) - Borang 13 - Jika ada pertukaran nama syarikat (Perakuan Pemerbadanan Atas Pertukaran Nama Syarikat). - Borang 19 (Perakuan Pemerbadanan Atas Pertukaran Menjadi Persendirian {Sdn. Bhd.}) - Borang 20 (Akta Syarikat 1965) - Perakuan Pemerbadanan Atas Pertukaran Menjadi Syarikat Awam - Sekiranya Badan Profesional sila kemukakan dokumen seperti di no. 5 atau 6 atau 7 atau 8 atau 9 atau 10 atau 11
2.	Perkongsian Liabiliti Terhad (PLT)	- Sijil Perakuan Perkongsian Liabiliti Terhad (PLT) - Maklumat Pekongsi-pekongsi - Perjanjian Perkongsian Liabiliti Terhad (PLT)
3	Ketuanpunyaan Tunggal (<i>Sole Proprietor</i>) / Perkongsian (Partnership) a. Berdaftar dengan SSM b. Berdaftar dengan agensi lain c. Tidak Berdaftar	- Maklumat Perniagaan - Borang D (Perakuan Pendaftaran) - Maklumat Pemilik - Sekiranya Badan Profesional sila kemukakan dokumen seperti di no. 5 atau 6 atau 7 atau 8 atau 9 atau 10 atau 11 Negeri Sarawak - Sijil Pendaftaran (Ordinan Nama-Nama Perniagaan) - Borang 1 (Seksyen 5,23, dan 24(2))-Kerajaan Negeri Sarawak - Ordinan Perniagaan,Profesion dan Pelesenan Perdagangan. - Pengesahan Pendaftaran Nama Perniagaan. - Lesen dari Pihak Penguasa Tempatan. - Lesen Pendaftaran Perniagaan dari Lembaga Hasil Dalam Negeri. Negeri Sabah - Lesen dari Pihak Berkuasa Tempatan—Borang B - Lesen Berniaga - Ordinan Pelesenan Perdagangan,1948 (Ordinan No. 6 Tahun 1948). BERDAFTAR DENGAN AGENSI LAIN - Salinan KPPN, Kad Pengenalan Tentera, Kad Pengenalan Polis, Kad Pengenalan Penduduk Tetap, Kad Keselamatan Sosial (SSN). TIDAK BERDAFTAR DENGAN SSM/AGENSI LAIN - Salinan KPPN, Kad Pengenalan Tentera, Kad Pengenalan Polis, Kad Pengenalan Penduduk Tetap, Kad Keselamatan Sosial (SSN).
4.	Pertubuhan / Persatuan/NGO/Society	BERDAFTAR DENGAN PENDAFTAR PERTUBUHAN Akta Pertubuhan 1966 (Peraturan-peraturan Pertubuhan 1984) - Borang 3 (Peraturan 5) Akta Pertubuhan 1966 - (Peraturan-Peraturan Pertubuhan 1984). - Perakuan Pendaftaran Senarai Ahli Jawatankuasa / Ahli Lembaga. - Perakuan Pendaftaran dari Pihak Berkuasa Negeri / Pihak Berkuasa Tempatan. - Senarai Ahli Jawatankuasa / Ahli Lembaga. BERDAFTAR DENGAN LAIN-LAIN AGENSI Akta Pembangunan Sukan 1997 dan Peraturan-Peraturan Pembangunan Sukan (Pendaftaran Badan dan Sukan 1998) - Perakuan Pendaftaran. - Senarai Ahli Jawatankuasa/Ahli Lembaga. Perakuan Perbadanan Pengurusan Bersama - Perakuan Pendaftaran dari Pihak Berkuasa Negeri/Pihak Berkuasa Tempatan. - Senarai Ahli Jawatankuasa/Ahli Lembaga. Pertukaran Nama - Perakuan Pertukaran Nama. - Senarai Ahli Jawatankuasa/Ahli Lembaga. BERDAFTAR DENGAN INTERNATIONAL BODIES - Surat pengesahan daripada agensi berkaitan. TIDAK BERDAFTAR DENGAN MANA-MANA AGENSI - Salinan KPPN, Kad Pengenalan Tentera, Kad Pengenalan Polis, Kad Pengenalan Penduduk Tetap, Kad Keselamatan Sosial (SSN).
5.	Koperasi	- Perakuan Pendaftaran Koperasi. - Senarai Ahli Lembaga/Jawatankuasa.
6.	Firma Guaman	- Sijil Pendaftaran Firma Guaman dari Majlis Peguam(Bar Council). - Certificate of Practice (Amalan Guaman).
7.	Klinik Perubatan	- Borang 12 (Akta Perubatan 1971). - Kelulusan daripada Malaysia Medical Consultant.

BIL	ENTITI PERNIAGAAN	DOKUMEN YANG DIPERLUKAN
8.	Audit	- Borang 5 - Maklumat Auditor
9.	Akauntan	- Certificate of Registration of firm (dari Malaysian Institute of Accountants) - Certificate of Membership (dari Malaysian Institute of Accountants)
10.	Arkitek	Perakuan Pendaftaran Pengamal Perundingan Senibina Dari Lembaga Arkitek Malaysia (Akta Arkitek 1967- Kaedah-Kaedah Arkitek (Pindaan) 2011)
11.	Badan-Badan Professional lain	Perakuan Pendaftaran daripada agensi-agensi berkaitan
12.	Perkhidmatan Awam Persekutuan dan Negeri	Surat pengesahan daripada agensi berkaitan
13.	Badan Berkanun Persekutuan dan Negeri	Surat pengesahan daripada agensi berkaitan
14.	Pihak Berkuasa Tempatan	Surat pengesahan daripada agensi berkaitan
16.	Kedutaan	Surat pengesahan dari Kedutaan berkaitan
17.	Perwakilan	<u>MIDA / MITI</u> - Salinan KPPN, Kad Pengenalan Penduduk Tetap, Pasport - Surat perakuan daripada MITI / MIDA <u>KONSUL KEHORMAT</u> - Salinan KPPN, Kad Pengenalan Penduduk Tetap, Pasport. - Surat Kelulusan daripada Kerajaan Malaysia - Surat Pelantikan dari Negara yang diwakili



nombor Pen
 operasi); ata
 nombor Pen
 nombor PTJ

MAK

41. Nama F

42. Alamat

Poskod

Peti Sur

43. Alama

Poskod

Peti Sur

44. No. Te

46. No. Fa

48. Jenis I

A8.

A8.

49. Kaeda

PENG

Saya dengar

Pendatangar

Nama Majika

No. KPPN:

awatan:

KEGUNA

Kod Majika

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BORANG 1
BORANG PENDAFTARAN MAJIKAN
PERATURAN-PERATURAN (AM) KESELAMATAN SOSIAL PEKERJA 1971
(Peraturan 10)

BORANG 1 - PENDAFTARAN MAJIKAN

Nombor Pendaftaran (No.SSM/MyCoID, Badan Profesional, Pertubuhan, Persatuan, Perserikatan, atau Persatuan); atau

Nombor Pengenalan Diri Majikan (yang tidak berdaftar dengan SSM dan agensi lain); atau

Nombor PTJ Kerajaan Persekutuan atau Kerajaan Negeri

MAKLUMAT PERUSAHAAN

Nama Perusahaan

Alamat surat-menyurat

Poskod

Negeri

Peti Surat

No. Beg Berkunci

WDT

(Bagi Sabah/Sarawak)

Alamat Perusahaan (Tidak perlu diisi jika alamat adalah sama seperti di A2)

Poskod

Negeri

Peti Surat

No. Beg Berkunci

WDT

(Bagi Sabah/Sarawak)

No. Telefon

A5. No. Tel. Bimbit

No. Faks

A7. E-mel

Jenis Perusahaan

A8.1. Entiti Perniagaan

☐

Sendirian Berhad

☐

Berhad

☐

Ketuanpunyaan Tunggal

☐

Perkongsian

☐

Perkongsian Liabiliti Terhad

☐

Berdaftar dengan SSM

☐

Berdaftar dengan agensi lain

☐

Tidak berdaftar

☐

Berdaftar dengan SSM

☐

Berdaftar dengan agensi lain

☐

Tidak berdaftar

A8.2. Lain-lain

(Kerajaan Persekutuan atau Negeri, Badan Berkanun, Pihak Berkuasa Tempatan, Perwakilan/Kedutaan, Pertubuhan/Persatuan, Koperasi)

Kaedah Bayaran Caruman

☐

Portal PERKESO

☐

Perbankan Internet

☐

CD

☐

Borang Caruman Bulanan (8A)

PENGESAHAN MAJIKAN/WAKIL MAJIKAN

Yang ditandatangani ini mengesahkan bahawa maklumat di atas adalah benar sepanjang pengetahuan dan kepercayaan saya.

Tandatangan

Majikan>Nama Wakil Majikan:

Tarikh

PPN:

Alamat:

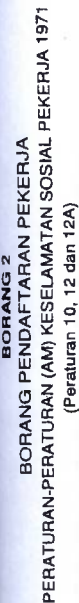
GUNAAN PERKESO

Majikan

Kod Perusahaan

Tarikh Liabiliti

Tandatangan tidak diperlukan sekiranya borang ini dihantar melalui medium elektronik tertakluk kepada pengesahan oleh PERKESO



BORANG 2- PENDAFTARAN PEKERJA

A. BUTIRAN PEKERJA

[illegible]

B. PENGESAHAN MAJIKAN / WAKIL MAJIKAN

Saya mengesahkan bahawa tiada seorang pun pekerja perusahaan ini sebagaimana yang ditakrifkan dalam seksyen 2(5) Akta telah terlinggal daripada senarai di atas.

Tandatangan:

Tarikh :

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Nama Majikan>Nama Wakil Majikan:

Nama Perusahaan:

No. KP PN:

Jawatan:

No. Telefon Pejabat/No. Telefon Bimbit

No. Faks:

E-mel :

Tandatangan tidak diperlukan sekiranya borang ini dihantar melalui medium elektronik tertakluk kepada pengesahan oleh PERKESO

PANDUAN BORANG 2

1) Di ruangan (1), sila pilih jenis kad pengenalan yang dimiliki oleh pekerja dengan memasukkan kod seperti di bawah :

BIL.	Jenis Kad Pengenalan	Kod
1	KPPN Baru	B
2	KPPN Lama	L
3	Kad Pengenalan Tentera	T
4	Kad Pengenalan Pollis	P
5	Penduduk Tetap	PR
6	Nombor Keselamatan Sosial	SSN

Pekerja yang tidak memiliki kad pengenalan seperti di atas, dikehendaki datang sendiri ke pejabat PERKESO yang berdekatan untuk pendaftaran Nombor Keselamatan Sosial (SSN) . Permohonan hendaklah dibuat dengan mengemukakan gambar terkini berukuran passport dan dan apa-apa dokumen sokongan yang mengesahkan kewarganegaraan pekerja (cth : sijil kelahiran pekerja, sijil perkahwinan ibu bapa, surat pengesahan dari ketua rumah panjang).

2) Di ruangan (6), sila pilih salah satu kod bangsa seperti berikut :

BIL.	KOD	KETERANGAN
1	01	Melayu
2	02	Cina
3	03	India
4	04	Bumiputera Sabah
5	05	Bumiputera Sarawak
6	06	Lain-lain

3) Di ruangan (9), tandakan (/) hanya kepada pekerja yang pertama kali mencarum dengan PERKESO.

4) Di ruangan B : Hendaklah dilengkapkan oleh majikan / Wakil majikan yang diberi kuasa.



A. BUTIRAN PEKERJA

[illegible]

B. PENGESAHAN MAJIKAN / WAKIL MAJIKAN

Saya mengesahkan bahawa tiada seorang pun pekerja perusahaan ini sebagaimana yang ditakrifkan dalam seksyen 2(5) Akta telah tertinggal daripada senarai di atas.

Tandatangan:

Tarikh:

Nama Majikan>Nama Wakil Majikan:

Nama Perusahaan:

No. KPPN:

Jawatan:

No. Telefon Pejabat/No. Telefon Bimbit

No. Faks:

E-mail :

Tandatangan tidak diperlukan sekiranya borang ini dihantar melalui medium elektronik tertakluk kepada pengesahan oleh PERKESO

PANDUAN BORANG 2

1) Di ruangan (1), sila pilih jenis kad pengenalan yang dimiliki oleh pekerja dengan memasukkan kod seperti di bawah :

Bil.	Jenis Kad Pengenalan	Kod
1	KPPN Baru	B
2	KPPN Lama	L
3	Kad Pengenalan Tentera	T
4	Kad Pengenalan Polis	P
5	Penduduk Tetap	PR
6	Nombor Keselamatan Sosial	SSN

Pekerja yang tidak memiliki kad pengenalan seperti di atas, dikehendaki datang sendiri ke pejabat PERKESO yang berdekatan untuk pendaftaran Nombor Keselamatan Sosial (SSN) . Permohonan hendaklah dibuat dengan mengemukakan gambar terkini berukuran passport dan dan apa-apa dokumen sokongan yang mengesahkan kewarganegaraan pekerja (cth : sijil kelahiran pekerja, sijil perkahwinan ibu bapa, surat pengesahan dari ketua rumah panjang).

2) Di ruangan (6), sila pilih salah satu kod bangsa seperti berikut :

KOD	KETERANGAN
1	01 Melayu
2	02 Cina
3	03 India
4	04 Bumiputera Sabah
5	05 Bumiputera Sarawak
6	06 Lain-lain

3) Di ruangan (9), tandakan (/) hanya kepada pekerja yang pertama kali mencarum dengan PERKESO.

4) Di ruangan B : Hendaklah dilengkapkan oleh majikan / Wakil majikan yang diberi kuasa.

PEJABAT DAERAH SAMARAHAN

**SENARAI SEMAK
DOKUMEN YANG DIPERLUKAN BAGI PERMOHONAN
MENDAFTAR NAMA-NAMA PERNIAGAAN**

Bil.	Perkara / Butiran	Tandakan (✓)
1	Kenalpasti (Lokaliti Daerah) Kawasan Kota SAMARAHAN	
2	1 SALINAN Kad Pengenalan / Rakan Kongsi	
3	Surat Kebenaran daripada Pemilik Bangunan / tanah / Salinan Geran / Surat Perjanjian Sewa	
4	1 SALINAN Permit dari Majlis Daerah Tempatan / JPJ / FINAS / NREB dsbnya	
5	Surat Sokongan / perakuan dari Penghulu / Ketua Masyarakat	
6	Contoh Cop Perniagaan lengkap beralamat	
7	1 SALINAN Borang 9 dan Borang 49 (Untuk Sdn. Bhd. sahaja)	

Nota:-

1. Permohonan hanya diproses selepas semua SALINAN dokumen disertakan.
2. SILA bawa "**SENARAI SEMAK**" ini bersama bila datang berurusan.

Disemak oleh:-

Permohonan DILULUSKAN /
TIDAK DILULUSKAN oleh:-

Tandatangan : _____

Tandatangan : _____

Nama : _____

Nama : **MOHD. AINNIE BIN HAJI WAHAB**
(Pegawai Daerah Samarahan)

Tarikh : _____

Tarikh : _____

BORANG 2

(Seksyen 5, 6, dan 23)

KERAJAAN NEGERI SARAWAK

ORDINAN PERNIAGAAN, PROFESION DAN PERLESENAN PERDAGANGAN
(THE BUSINESS, PROFESSIONS AND TRADES LICENSING ORDINANCE)

PERMOHONAN UNTUK LESEN PERDAGANGAN

1. (a) Nama Pemohon
- (b) Nama bagi lesen dikeluarkan jika tidak menggunakan pemohon
2. Nama Perniagaan
3. Jenis Perniagaan
4. Tempat perniagaan dijalankan
5. Alamat urusan pemakluman jika berlainan dengan (4) di atas
6. Jika Perniagaan telah/hendak dimulakan selepas 1 Januari pada tahun permohonan ini dibuat, nyatakan tarikh permulaan perniagaan

Saya memohon Lesen Perdagangan untuk perniagaan seperti yang dinyatakan di atas dan DENGAN INI SAYA MENGAKU BAHAWA saya bercadang untuk membuat pembayaran setahun/setengah tahun sekali.

Tarikh

Tandatangan Pemohon

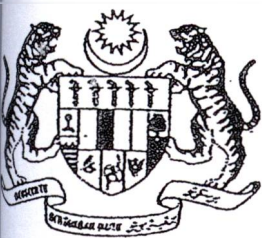
DENDA BAGI PENGAKUAN PALSU

Di bawah seksyen 18 sesiapa yang membuat kenyataan yang palsu mengenai apa-apa maklumat atau dengan cara meninggalkan sebarang maklumat manakala dia mengetahui atau ada sebab untuk mempercayai kenyataan itu palsu, dia akan dianggap melakukan kesalahan dan didenda sebanyak seribu ringgit dan di penjara selama 6 bulan.

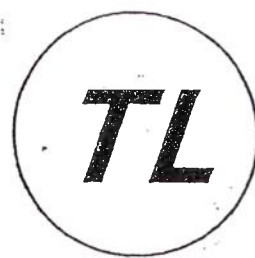
NOTA: Permohonan yang berasingan diperlukan bagi tiap-tiap jenis perniagaan.

Untuk Kegunaan Pejabat Sahaja

No. Permohonan	No. Pendaftaran Nama Perniagaan	Jenis	Bayaran Tahunan	Kuantiti Lesen Dikeluarkan



JABATAN PERANGKAAAN MALAYSIA
NEGERI SARAWAK
STATISTICS DEPARTMENT
STATE OF SARAWAK



BANCI PERTUBUHAN-PERTUBUHAN BERNIAGA YANG BERLESEN
CENSUS OF LICENSED TRADING ESTABLISHMENTS

1. BUTIR-BUTIR LESEN (PARTICULARS OF LICENCE)

1. Tahun bagi Lesen yang dipohon
Year for which Licence is applied

(i) Nombor Pendaftaran Perniagaan
Business Registration No.

(ii) Lesen Baru
New Licence

(iii) Pembaharuan
Renewal

Nama Perniagaan/Syarikat (Name of Business/Company)

Alamat tempat berniaga (Rumah/Nombor Kedai, Jalan, Kampung/Bandar, Daerah dll.)
Business Address (House/Shop No., Road, Village/Town, District, etc.,)

Alamat Pos Perniagaan (Postal Address)

Nombor Telefon (Telephone No.)

2. BUTIR-BUTIR PERNIAGAAN (BUSINESS PARTICULARS)

1) Bidang/Sektor perniagaan tuan (sila tandakan [✓] pada kotak yang berkaitan di bawah)
Field/Sector of your business (please tick [✓] in the appropriate boxes below)

☐ Pertanian (Agriculture)

☐ Perlombongan (Mining)

☐ Penggalan Batu (Quarrying)

☐ Pembinaan (Construction)

☐ Perniagaan Borong (Wholesale)

☐ Perniagaan Runcit (Retail)

☐ Restoran (Restaurant)

☐ Hotel (Hotel)

☐ Pengangkutan (Transportation)

☐ Pos/Telekomunikasi (Post/Telecommunication)

☐ Komputer & Aktiviti Berkaitan (Computer & Related Activities)

☐ Pembuatan (Manufacturing)

☐ Pendidikan (Education)

☐ Perkhidmatan Profesional (Professional Services)

☐ Perkhidmatan Kesihatan (Health Services)

☐ Lain-lain (sila nyatakan)

Others (please specify)

2) Sila terangkan dengan jelas aktiviti perniagaan utama anda
Please describe your main business activity

3) Saya mengaku kenyataan di atas adalah benar mengikut pengetahuan dan pendapat saya.
I declare the above statement is true to the best of my knowledge and belief.

Nama:

Alamat:

Tandatangan:

Signature:

Tempat:

Business Chop:

Cop Perniagaan:

Business Chop:

4) Jika anda menghadapi kesulitan dalam pengisian borang ini, sila hubungi Jabatan Perangkaan Malaysia yang terdekat di bawah ini:-

If you encounter any difficulties in filling this form, please contact the nearest Statistics Department as follows:-

(i) Kuching 082-231780

(ii) Sri Aman 083-321355

(iii) Sibul 084-333690

(iv) Sarikei 084-651019

(v) Miri 085-442388

(vi) Limbang 085-213343

(vii) Bintulu 086-331918



APPLICATION FORM / BORANG PERMOHONAN

To qualify, applicants must be 21 years or above for Principal Cardmember, and 18 years or above for Supplementary Cardmember. Age limit for applicants is 65 years.

To expedite processing, please enclose:

1. Copy of NRIC (both sides) or passport. Supplementary applicants' included
2. Latest BE form with official test receipt
3. Latest 2 months' salary slips
4. Latest 3 months' savings account transaction/current account statements
5. For Self-employed - copies of your Business Registration and latest 3 months' bank / sale orders
6. For Expatriates - Letter from employer confirming duration of employment contract in Malaysia. Applicant must be a Maybank account holder
7. For Graduates - Copy of Degree Certificate/Professional Qualification and employment letter or 1 month salary slip

If you have been a **PRINCIPAL Credit/Charge Cardmember** for at least 1 year of a card issued in Malaysia and valid worldwide, just enclose a copy of your NRIC and credit/charge card

MINIMUM ANNUAL INCOME REQUIREMENTS

Card Type	1 Card (RM)	Multiple Cards (RM)
Petronas Idaman Visa	30,000	30,000
Petronas Idaman Platinum Visa	100,000	100,000

Note: Documents submitted are non-refundable. Additional documents may be requested (when necessary) upon processing. Approval is subject to the bank's credit assessment and the bank has the right not to disclose reasons for declining.

Pemohon mestilah berusia 21 tahun ke atas untuk melayakkan diri menjadi Ahli Kad Utama, dan berusia 18 tahun ke atas untuk menjadi Ahli Kad Tambahan. Had umur untuk pemohon adalah 65 tahun.

Untuk memudahkan pemrosesan, sila sertakan:

1. Salinan Kad Pengesahan (lepas dan belakang) atau pasport, termasuk pemohon tambahan
2. Borang BE terkini serta resit cajai rasmi
3. Penyata gaji 2 bulan terkini
4. Transaksi akaun simpanan/penyata akaun semasa 3 bulan terkini
5. Untuk yang Bekerja Sendiri - salinan Pendaftaran Perniagaan dan penyata bank 3 bulan terakhir
6. Untuk Pekerja Asing - Surat daripada majikan mengesahkan tempoh kontrak pekerjaan di Malaysia. Pemohon mestilah merupakan pemegang akaun Maybank
7. Untuk Graduan - Salinan ijazah/Kelayakan Profesional dan surat tawaran kerja atau penyata gaji 1 bulan

Jika anda telah menjadi **ANLI UTAMA** kad kredit/kaad untuk sekurang-kurangnya 1 tahun bagi kad yang dikeluarkan di Malaysia dan sah serenti dunia, hanya sertakan salinan KP dan kad kredit/kaad anda

KEPERLUAN MINIMA PENDAPATAN TAHUNAN

Jenis Kad	1 Kad (RM)	Berbilang Kad (RM)
Petronas Idaman Visa	30,000	30,000
Petronas Idaman Platinum Visa	100,000	100,000

Note: Dokumen yang dihantar tidak akan dikembalikan. Dokumen tambahan mungkin diminta jika perlu semasa pemrosesan. Keputusan terakut kepada pemohonan kredit bank dan bank berhak untuk tidak mengemukakan alasan penolakan.

Please select your choice of card(s) / Sila nyatakan kad (kad-kad) pilihan anda:

- ☐ Petronas Idaman Visa ☐ Petronas Idaman Platinum Visa

PERSONAL DATA / BUTIRAN PERIBADI

Title / Gelaran ☐ Mr / En ☐ Mrs / Pn ☐ Ms / Cik

Name as in NRIC or Passport / Nama mengikut KP atau Pasport:

NRIC No. (New) / No. KP (Baru)

NRIC No. (Old) / No. KP (Lama)

Passport No. / No. Pasport

Date of Birth / Tarikh Lahir

Name to appear on card (maximum 19 characters) / Nama untuk dicetak pada kad (tidak melebihi 19 huruf)

Home Address / Alamat Rumah

Postcode / Poskod

Home Tel. / Tel. Rumah

HP No. / No. Tel. Bimbit

Residence / Kediaman ☐ Own / Milik Sendiri ☐ Parents' / Milik Ibu Bapa

☐ Rented / Sewa ☐ Relatives' / Milik Saudara ☐ Others / Lain-lain

Years Spent There / Tempoh Menetap

Marital Status / Taraf Perkahwinan ☐ Married / Berkahwin ☐ Single / Bujang

☐ Widowed / Bala ☐ Divorced / Bercera

No. of Dependents / Bil. Tanggungan

Education / Taraf Pendidikan ☐ Below Secondary / Pendidikan Rendah

☐ Secondary / Pendidikan Menengah

☐ Diploma / Diploma

☐ Bachelor / Ijazah

☐ Master / Ijazah Lanjutan

☐ Doctorate / Doktoran

☐ Professional Qualification / Kelayakan Profesional

Interest/Hobby / ☐ Antique Collection/ Koleksi Antik

☐ Art/Theatre / Kesenian/Teater

☐ Club Membership/Golf / Keahlian Kelab/Golf

☐ Computers / Komputer

☐ Fashion / Fesyen

Mother's Name / Nama Ibu

(This feature is for your security when verification is required / Ciri ini adalah untuk keselamatan anda jika pengesahan diperlukan)

What other financial products/services would you require in the near future / ☐ Home Financing / Pinjaman Perumahan

☐ Insurance (Life) / Insurans (Hayat) ☐ Car Financing / Pinjaman Kereta

☐ Unit Trust/Investment / Amanah Saham/Pelaburan ☐ Insurance (General) / Insurans (Am)

☐ Others / Lain-lain

Please specify / Sila nyatakan

EMPLOYMENT DETAILS / RUJUKAN PEKERJAAN

Name of Employer/Firm / Nama Majikan/Firma

Office Tel. / Tel Pejabat

Office Fax / Faks Pejabat

Office Address / Alamat Pejabat

Postcode / Poskod

Nature of Business / Jenis Perniagaan

Designation / Jawatan

Business Classification / Jenis Perniagaan

☐ Sole Proprietorship / Milik Sendiri ☐ Partnership / Perkongsian ☐ Government / Kerajaan

☐ Sdn Bhd ☐ MMC/Public Listed / MMC/Senara Awam

☐ Others / Lain-lain

Years employed/in business / Tempoh perkhidmatan/dalam perniagaan

BANKING REFERENCES / RUJUKAN KEWANGAN

Bank

Card No. / No. Akaun

Type of A/C / Jenis Akaun

Date Opened / Tarikh Dibuka

INCOME / PENDAPATAN

Annual/Business Income / Pendapatan Tahunan/Perniagaan

Other Income / Pendapatan Lain

(Please enclose supporting documents / Sila sertakan dokumen sokongan)

SPOUSE / PASANGAN

Name as in NRIC or Passport / Nama mengikut KP atau Pasport

NRIC No. (New) / No. KP (Baru)

NRIC No. (Old) / No. KP (Lama)

Passport No. / No. Pasport

Date of Birth / Tarikh Lahir

If employed, name and address of employer / Jika bekerja, nama dan alamat majikan

Postcode / Poskod

Office Tel. / Tel. Pejabat

Designation / Jawatan

Annual Income / Pendapatan Tahunan

EMERGENCY CONTACT / RUJUKAN KECEMASAN

(Parents/immediate family members not living with you / Ibu bapa/ahli keluarga yang tidak tinggal serumah dengan anda)

Name / Nama

Relationship / Pertalian

Home Address / Alamat Rumah

Postcode / Poskod

Home Tel. / Tel. Rumah

Office Tel. / Tel. Pejabat

HP No. / No. Tel. Bimbit

BILLING ADDRESS AND COLLECTING BRANCH / ALAMAT SURAT-MENYURAT DAN PENGAMBILAN KAD

Bill to / Bil ke ☐ Home / Rumah ☐ Office / Pejabat

Collection of Card(s) / Pengambilan kad :

☐ Please courier to my billing address / Sila hantar ke alamat surat-menyurat saya
(Note: Delivery of cards by courier is currently applicable to Peninsular Malaysia, Sabah and Sarawak except in P.O. Box addresses. Perhatian: Penghantaran kad melalui kurir boleh dilaksanakan untuk Semenanjung Malaysia, Sabah dan Sarawak melainkan alamat peti surat.)

☐ Collect at Credit Card Desk, 1st Floor, Menara Maybank / Pengambilan di Kaunter Kad Kredit, Tingkat 1, Menara-Maybank

☐ Collect at Maybank branch / Pengambilan di cawangan Maybank

(State the branch / Namakan cawangan)

OTHER CREDIT OR CHARGE CARDS / KAD KREDIT ATAU KAD CAJ LAIN

Bank

Card No. / No. Kad

Member Since / Ahli Sejak

Credit Limit / Had Kredit

SUPPLEMENTARY CARD INFORMATION / BUTIR-BUTIR KAD TAMBAHAN

I wish to apply for a / Saya ingin memohon untuk ☐ Petronas Ikhwan Visa ☐ Mr / En ☐ Mrs / Pn ☐ Ms / Dik

Name as in NRIC or Passport / Nama mengikut KP atau Pasport:

Name to appear on card (maximum 19 characters) / Nama untuk dicetak pada kad (tidak melebihi 19 huruf)

NRIC No. (New) / No. KP (Baru)

NRIC No. (Old) / No. KP (Lama)

Passport No. / No. Pasport

Date of Birth / Tarikh Lahir

Relationship to Principal Cardmember / Pertalian dengan Ahli Kad Utama

(If other than Principal Cardmember's address / Jika berbeza dengan alamat Ahli Kad Utama)

Home Address / Alamat Rumah

Postcode / Poskod

Name and Address of Employer / Nama dan Alamat Majikan

Postcode / Poskod

Designation / Jawatan

Annual Income / Pendapatan Tahunan RM

Facility Limit / Had Kemudahan

☐ I would like to assign % of my facility limit to my Supplementary cardmember.

Saya ingin menetapkan % atau RM daripada had kemudahan saya untuk Ahli Kad Tambahan saya.

(Note: Minimum facility limit assigned should not be less than RM1,000. Total combined facility limit cannot exceed the Principal cardmember's approved facility limit. / Perhatikan: Had kemudahan minimum yang ditetapkan tidak boleh kurang daripada RM1,000. Jumlah gabungan had kemudahan tidak boleh melebihi had kemudahan yang diberikan untuk Ahli Kad Utama.)

☐ My Supplementary cardmember will share my facility limit.

Ahli Kad Tambahan saya akan berkongsi had kemudahan saya.

Monthly RM / RM Bulanan

☐ Separate statement - Supplementary Cardmember will be sent own statement.

Pernyataan Berasingan - Ahli Kad Tambahan akan menerima pernyataannya sendiri.

Duplicate statement - Supplementary Cardmember will be sent own statement and the copy sent to Principal.

Pernyataan salinan - Ahli Kad Tambahan akan menerima pernyataan sendiri dan salinan dihantar kepada Ahli Kad Utama.

☐ Joint statement - Principal and Supplementary Card activities are combined and sent to Principal Cardmember.

Pernyataan Bersama - Aktiviti Kad Utama dan Kad Tambahan digabungkan dalam satu pernyataan dan dihantar kepada Ahli Kad Utama.

MAYBANKARD TOUCH 'N GO ZING INFORMATION / BUTIR-BUTIR MAYBANKARD TOUCH 'N GO ZING

Free Subscription Fee Principal Card / Kad Utama

☐ YES, I would like the convenience of the Maybankard Touch 'N Go Zing and please link to Petronas Ikhwan Visa / YA, saya ingin mendapatkan kemudahan Maybankard Touch 'N Go Zing dan sila hubungkan ke Petronas Ikhwan Visa

Supplementary Card / Kad Tambahan

☐ YES, I would like the convenience of the Maybankard Touch 'N Go Zing and please link to Petronas Ikhwan Visa / YA, saya ingin mendapatkan kemudahan Maybankard Touch 'N Go Zing dan sila hubungkan ke Petronas Ikhwan Visa

I agree to abide by the terms and conditions of the Touch 'N Go Zing Card (hereinafter referred to as "the Card") and any other terms and conditions imposed by Rangkaian Segar Sdn. Bhd. (hereinafter referred to as "RSSB") from time to time for the Card facilities. I understand that the Card remains the property of RSSB and must be returned to RSSB upon request. By signing and/or using the Card I agree to be bound by the terms and conditions imposed by the Card and any other variations or amendments thereof. I hereby confirm that the Card has an automatic rebate amount of RM100, and irrevocably authorize Malaysian Banking Berhad to debit my Petronas Ikhwan Visa Account for each reload and the automatic rebate fee of RM2 whenever the account balance drops to RM50. In the event that I wish to cancel my Maybankard Touch 'N Go Zing, there will be a charge of refund processing fee of RM5 and RM10 for new card replacement.

Saya bersetuju untuk terikat kepada segala terma dan syarat-syarat telah ditetapkan oleh Kad Touch 'N Go Zing (kemudian di sini dirujuk sebagai "Kad") serta lain-lain terma dan syarat yang telah ditetapkan oleh Rangkaian Segar Sdn. Bhd. (kemudian di sini dirujuk sebagai "RSSB") dari semasa ke semasa untuk Kemudahan Kad ini. Saya faham bahawa Kad ini adalah milik RSSB dan mesti dikembalikan kepada RSSB apabila diminta. Dengan menandatangani dan/atau menggunakan Kad ini, saya bersetuju untuk terikat kepada terma dan syarat-syarat Kad ini termasuk pindaan kepada terma dan syarat-syarat tersebut. Saya mengesahkan penerimaan saya untuk Kad ini dengan penambahan automatik bernilai RM100, dan memberi kuasa kepada Malaysian Banking Berhad untuk mendebit Akaun Petronas Ikhwan Visa saya untuk setiap penambatan dan yuran tambahan nilai automatik sebanyak RM2 apabila baki akaun menurun sehingga RM50. Sekiranya saya membatalkan Kad Maybankard Touch 'N Go Zing saya, yuran pemrosesan bayaran baki sebanyak RM5 akan dikenakan, manakala yuran RM10 akan dikenakan untuk mendapatkan kad gantian baru.

Declaration / Pengakuan

"We declare that the above information given by me/us is true and complete. I/we hereby authorize you to verify information on credit and any supplementary application(s) from whatever source you consider appropriate from any financial institution and the Director General of Inland Revenue Department on any information which Maybank Islamic Berhad may require. I/we also confirm that none of my/our spouse(s), parents and/or children are employees of Maybank Islamic Berhad or Malaysian Banking Group. I/we confirm that I/we shall read the Terms and Conditions of the Petronas Ikhwan Visa Agreement which have been display on the Maybank2u.com website and agree to be bound by them and all future amendments thereto before accepting and receiving the card(s). In the event I/we require a hard copy of the said Petronas Ikhwan Visa Cardmember Agreement, I/we may request for a copy of the same from the Bank. I/we further agree that the Principal Cardmember shall be responsible for all liabilities and obligations of the Principal Cardmember as well as those of the Supplementary Cardmember(s). The Supplementary Cardmember however, shall only be responsible for his/her own liabilities and obligations. The Bank shall reserve the absolute right to approve or reject my/our application as The Bank deems fit without assigning any reason. I/we understand the card(s) remain the property of Maybank Islamic Berhad and shall be subject to cancellation without notice and would be reclaimed upon request. I/we hereby agree to you disclosing information to Bank Negara Malaysia regarding my/our credit facilities and my/our account with you, as may be required, whether pursuant to law or otherwise. Maybank Islamic Berhad shall not be liable whether directly or indirectly to me/us or any other persons for such disclosure."

"We further agree and authorize the Bank to make the relevant credit references with external parties including but not limited to CCRIS, and any other credit reference agencies and that in so doing the Bank shall be entitled to disclose such information as may be necessary in order for the external parties to provide the Bank with the references/confirmation sought."

"Saya/Kami sesungguhnya berikrar bahawa maklumat yang diberikan di atas oleh saya/kami adalah benar dan lengkap. Saya/Kami memberi kuasa kepada anda untuk mengesahkan maklumat tentang saya/kami dan mana-mana pemohon tambahan dari mana-mana sumber yang difikirkan sesuai, dari mana-mana institusi kewangan dan Ketua Pengarah Lembaga Hasil Dalam Negeri, untuk apa sahaja maklumat yang Maybank Islamic Berhad perlukan. Saya/Kami juga mengesahkan bahawa tiada pasangan, ibu bapa dan/atau anak-anak saya/kami yang bekerja dengan Maybank Islamic Berhad atau Kumpulan Maybank Banking. Saya/Kami mengesahkan bahawa saya/kami akan membaca Syarat dan Peraturan Perjanjian Petronas Ikhwan Visa yang telah dipaparkan di laman web Maybank2u.com dan bersetuju untuk mematuhi dan segala pindaan akan datang sebelum menerima dan mengambil kad (kad-kad). Sekiranya saya/kami memerlukan salinan Perjanjian Petronas Ikhwan Visa tersebut, saya/kami boleh meminta salinan tersebut daripada pihak Bank. Saya/Kami seterusnya bersetuju bahawa Ahli Kad Utama hendaklah bertanggungjawab terhadap semua liabiliti dan obligation Ahli Kad Utama serta Ahli (Ahli) Kad Tambahan. Walau bagaimanapun, Ahli Kad Tambahan akan hanya bertanggungjawab terhadap liabiliti dan obligation sendiri. Bank mempunyai hak untuk membatalkan atau menolak permohonan saya/kami sewajarnya tanpa memberi apa-apa sebab. Saya/Kami faham bahawa kad tersebut masih hak milik Maybank Islamic Berhad dan akan terikat kepada pindaan tanpa pemberitahuan awal dan perlu dikembalikan atas permintaan. Saya/Kami dengan ini memberi kebenaran kepada Maybank Islamic Berhad untuk mendedahkan maklumat tentang hubungan kemudahan kad atau akaun saya/kami kepada Bank Negara Malaysia, sebagaimana yang ditetapkan oleh undang-undang atau sebaliknya. Maybank Islamic Berhad tidak akan bertanggungjawab terhadap sebarang liabiliti, secara langsung atau tidak langsung, yang disebabkan oleh pendedahan berkenaan, sama ada kepada saya/kami ataupun mana-mana pihak lain."

"Saya/Kami bersetuju dan membenarkan Bank untuk melaksanakan rujukan kredit yang relevan dengan pihak luar termasuk tetapi tidak terhad kepada CCRIS, dan sebarang agensi rujukan kredit lain dan semasa usaha rujukan kredit. Bank berhak mendedahkan maklumat yang wajar untuk membenarkan pihak luar memberi Bank rujukan/keputusan yang dicari."

(For External Account Members Only / Untuk Ahli Akaun Luar Sahaja)
I/we confirm that my/our financings from all sources within Malaysia do not exceed in aggregate of RM200,000. / Saya/Kami mengesahkan bahawa pembiayaan saya/kami dari segala sumber di dalam Malaysia tidak melebihi agregat RM200,000.

Signature of Principal Applicant Tandatangan Pemohon Kad Utama

Signature of Supplementary Applicant Tandatangan Pemohon Kad Tambahan

Date / Tarikh

Date / Tarikh

E-mail / E-mel

Akad Declaration / Pengakuan Akad

"In facilitate this Financing procedure of the Bank in accordance to the Shariah principle of Bay 'Al Insh (sale and buy back), I hereby make an offer to buy the Asset from the Bank at the Bank's Selling Price which is equivalent to the approved Facility Limit plus a profit margin by the Bank." "And subsequently thereafter, I hereby make an offer to sell the Asset to the Bank at an agreed Bank's Purchase Price being equivalent to the approved Facility Limit upon the terms and conditions hereto and indicated in the Approved Letter."

"Bagi memuluskan prosedur pembiayaan Bank ini, di bawah prinsip Syariah Bay 'Al Insh (jual dan beli semula) saya dengan ini membuat tawaran untuk membeli Aset daripada pihak Bank pada Harga Jual Bank bersamaan dengan had kemudahan yang diluluskan ditambah dengan margin keuntungan Bank." "Dan selang itu, saya dengan ini membuat tawaran untuk menjual semula Aset tersebut kepada Bank pada Harga Beli yang dipersebutkan bersamaan dengan Had Kemudahan yang diluluskan terbalik kepada terma dan syarat-syarat di sini dan yang tertera pada Surat Kelulusan."

Signature of Principal Applicant / Tandatangan Pemohon Kad Utama

Date / Tarikh

BALANCE TRANSFER PLAN / PELAN PEMINDAHAN BAKI

Transfer your balance from other credit cards to save on profit charge! / Pindah baki anda dari kad kredit yang lain untuk penjimatan caj keuntungan!

☐ YES! I want to enjoy profit charge savings / YA! Saya ingin menikmati penjimatan caj keuntungan
For faster processing, please enclose a photocopy of the latest credit card account statement(s) you wish to transfer from. / Untuk mempercepatkan pemrosesan, sila lampirkan salinan pernyataan akaun (palam account) kad kredit terkini yang ingin anda pindahkan

Choose your Balance Transfer Plan to Transfer Outstanding Balances *			
Balance Transfer Plan / Pelan Pemindahan Baki	Special Profit Charges / Caj Keuntungan Khas	Effective Period / Tempoh Tawaran	Min. Transfer Amount / Jumlah Pemindahan Minimum
6 months Plan / Pelan 6 bulan	0.5% p.m. / sebulan	6 months / bulan	RM1,000
9 months Plan / Pelan 9 bulan	0.75% p.m. / sebulan	9 months / bulan	RM1,000
12 months Plan / Pelan 12 bulan	1.0% p.m. / sebulan	12 months / bulan	RM1,000
24 months Plan / Pelan 24 bulan	0.375% p.m. / sebulan	24 months / bulan	RM2,000
36 months Plan / Pelan 36 bulan	0.413% p.m. / sebulan	36 months / bulan	RM2,000

* Terms and conditions apply / Terletak kepada terma dan syarat-syarat
Note: Normal Profit Charges of 1.46% p.m. or 17.5% p.a., the monthly payment is assumed at 5% of outstanding balance.

Note: Caj Keuntungan normal ialah 1.46% sebulan atau 17.5% setahun dengan andaian pembayaran bulanan sebanyak 5% daripada baki belum jelas.

Please provide details of the amount you want to transfer / Berikan butiran jumlah yang ingin anda pindahkan

1. Plan / Pelan ☐ 6 months/bulan ☐ 9 months/bulan ☐ 12 months/bulan ☐ 24 months/bulan ☐ 36 months/bulan

Card Issuer / Pengeluar Kad

Card No. / No. Kad

Amount to be settled / Jumlah yang perlu dijelaskan RM

2. Plan / Pelan ☐ 6 months/bulan ☐ 9 months/bulan ☐ 12 months/bulan ☐ 24 months/bulan ☐ 36 months/bulan

Card Issuer / Pengeluar Kad

Card No. / No. Kad

Amount to be settled / Jumlah yang perlu dijelaskan RM

3. Plan / Pelan ☐ 6 months/bulan ☐ 9 months/bulan ☐ 12 months/bulan ☐ 24 months/bulan ☐ 36 months/bulan

Card Issuer / Pengeluar Kad

Card No. / No. Kad

Amount to be settled / Jumlah yang perlu dijelaskan RM

TOTAL / JUMLAH RM

I/We agree that Maybank Islamic Berhad shall reserve the absolute right to approve or reject my/our request as you deem fit without assigning any reason. For the purpose herein, I/we authorise Maybank Islamic Berhad to check and receive all information relating to my/our account with the card issuer(s) or any other banks or financial institutions. I/We confirm that I/we shall read the Terms and Conditions of the Balance Transfer Plan which have been display on the www.maybank2u.com website and agree to be bound by them and all future amendments thereto before making a balance transfer.

Saya/Kami bersetuju bahawa pihak Maybank Islamic Berhad mempunyai hak mutlak untuk meluluskan atau menolak permintaan saya/kami atas budi bicaranya tanpa memberikan sebarang sebab. Untuk tujuan perkara ini, saya/kami memberi kebenaran kepada Maybank Islamic Berhad untuk memeriksa dan menerima semua maklumat berkaitan akaun saya/kami dengan pengeluar (pengeluar-pengeluar) kad atau mana-mana bank atau institusi kewangan lain. Saya/Kami mengesahkan bahawa saya/kami akan membaca Syarat dan Peraturan Plan Pemindahan Baki yang telah dinyatakan di laman web www.maybank2u.com dan bersetuju untuk mematuhiya dan segala pindaan akan datang sebelum membuat pemindahan baki.

IMPORTANT INFORMATION ON TRANSFERRING YOUR BALANCE

- Balance transferable is subject to available facility limit and on the bank's credit assessment.
- The minimum amount you can transfer for 6, 9 & 12 months Plans are RM1,000 while for 24 & 36 months Plans are RM2,000. Whereas the maximum amount is dependent on your available facility limit.
- You can transfer your other credit cards balance from up to three other banks at one time.
- The cheque payment to the other banks will be effected within 10 business days from the date of approval of your Balance Transfer.
- Maybank Islamic will notify you of the status of your application in writing.
- The profit charges will be calculated from the date your account is debited for settlement of yourcard account with other issuers.
- For all plan: Upon approval of your Balance Transfer, the balance transferred will be in your Maybank Islamic Petronas Ikhwan/Visa account.
- Only open to Maybankcard/Maybank Islamic Card Principal Cardmembers and Principal Cardmembers of other card issuers.

MAKLUMAT PENTING TENTANG PEMINDAHAN BAKI ANDA

- Baki yang boleh dipindahkan terhad kepada had kemudahan sedia ada dan penilaian kredit oleh bank.
- Jumlah minima yang boleh dipindahkan untuk Plan 6, 9 & 12 bulan ialah RM1,000 dan bagi Plan 24 & 36 bulan ialah RM2,000. Manakala jumlah maksimum bergantung kepada had kemudahan anda.
- Anda boleh memindahkan baki daripada sehingga tiga bank lain pada satu-satu masa.
- Pembayaran cek kepada bank-bank lain akan dibuat dalam tempoh 10 hari urus niaga dari tarikh Pemindahan Baki anda diluluskan.
- Maybank Islamic akan memaklumkan status permohonan anda secara bertulis.
- Caj keuntungan akan dikira dari tarikh akaun anda didebitkan untuk menjelaskan akaun kad anda bersama pengeluar lain.
- Bagi semua plan: Selepas Pemindahan Baki anda diluluskan, baki yang dipindahkan akan berada di dalam akaun Maybank Islamic Petronas Ikhwan/Visa account anda.
- Hanya terbuka kepada Ahli Kad Utama Maybankcard/Kad Maybank Islamic dan Ahli Kad/Ikama pengeluar kad-kad lain.

For Bank's Use / Untuk Kegunaan Bank	Processed By / Diproses Oleh	Approval Date / Tarikh Diluluskan	Balance Transfer Account / Akaun Pemindahan Baki

MEMBERSHIP FEES AND CHARGES / YURAN DAN CAJ KEAHILIAN

A) Membership Fees / Yuran Keahlian

Annual Fees / Yuran Tahunan	PETRONAS Ikhwan Visa
Principal / Kad Utama (RM)	
Gold / Emas	FREE / Percuma
Platinum	
Supplementary / Kad Tambahan (RM)	
Gold / Emas	FREE / Percuma
Platinum	
Joining fee / Yuran Keahlian	None / Tiada caj

FREE Maybankcard Touch'n Go Zing subscription fee for PETRONAS Ikhwan Visa. Automatic reload fee-RM2 (each reload). / Pengesucian yuran langganan maybankcard Touch'n Go Zing untuk PETRONAS Ikhwan Visa. Yuran tambah-RM2 (Setiap kad tambah nilai).

B) Profit Charges / Caj Keuntungan

Conditions / Syarat Payment in Months / Bayaran Bulat Bulanan Total 12 Months / Selama 12 Bulan	Profit Rate / Kadar Keuntungan	
	Per Month / Bulanan	Per Annum / Tahunan
For Prompt Payment of 12/12 months Bayaran bulat segera 12/12 Bulan	1.13%	13.5%
For Prompt Payment of 10/12 months Bayaran bulat segera 10/12 Bulan	1.33%	16%
For Prompt Payment of less than 10/12 months Bayaran bulat segera kurang daripada 10/12 Bulan	1.46%	17.5%

- Profit Charge is imposed on the Outstanding Retail Transaction balance that is not paid after the Payment Due Date. The Profit Charge will be calculated from the day the transactions were posted until full payment.
- Cash Withdrawal - 18% p.a. or 1.5% p.m. of the cash withdrawal amount calculated on a daily basis.
- Balance Transfer - 6 months Plan: 6% p.a. or 0.5% p.m. for the first 6 months for minimum transfer amount of RM1,000.00. 9 months Plan: 9% p.a. or 0.75% p.m. for the first 9 months for minimum transfer amount of RM1,000.00. 12 months Plan: 12% p.a. or 1.0% p.m. for the first 12 months for minimum transfer amount of RM1,000.00. 24 months Plan: 4.5% p.a. or 0.375% p.m. for 24 months for minimum transfer amount of RM2,000.00. 36 months Plan: 4.95% p.a. or 0.413% p.m. for 36 months for minimum transfer amount of RM2,000.00. Profit Charge on the subsequent months for the above plans are up to 17.5% p.a. of the balance amount transferred calculated on a daily basis.
- Caj Keuntungan dikenakan ke atas jumlah Urus niaga Pembelian Runcit tidak dibayar selepas Tarikh Akhir Pembayaran. Pengiraan Caj Keuntungan bermula dari tarikh urus niaga diposkan ke dalam akaun kad sehingga pembayaran penuh.
- Pengeluaran Tunai - 18% setahun atau 1.5% sebulan bagi jumlah pengeluaran wang tunai yang dikira atas dasar harian.
- Pemindahan Baki - Plan 6 bulan: 6% setahun atau 0.5% sebulan untuk 6 bulan pertama bagi jumlah pemindahan minima RM1,000. Plan 9 bulan: 9% setahun atau 0.75% sebulan untuk 9 bulan pertama bagi jumlah pemindahan minima RM1,000. Plan 12 bulan: 12% setahun atau 1% sebulan untuk 12 bulan pertama bagi jumlah pemindahan minima RM2,000. Plan 24 bulan: 4.5% setahun atau 0.375% sebulan untuk 24 bulan bagi jumlah pemindahan minima RM2,000. Plan 36 bulan: 4.95% setahun atau 0.413% sebulan untuk 36 bulan bagi jumlah pemindahan minima RM2,000. Caj keuntungan untuk bulan-bulan seterusnya bagi plan-plan di atas adalah sehingga 17.5% sebulan bagi baki jumlah yang dipindahkan, dikira atas dasar harian.

C) Late Payment Compensation Fee / Caj Gantirugi

If the MINIMUM PAYMENT is not made by the PAYMENT DUE DATE, a Compensation Fee will be levied at 1% of the previous statement balance or RMS, whichever is higher, up to a maximum of RM50. / Jika PEMBAYARAN BAKI MINIMA tidak dibuat pada TARIKH MATANG, Caj Gantirugi 1% daripada jumlah baki belum jelas pada tarikh penyata anda atau minima RMS, yang mana lebih tinggi, sehingga baki maksimum sebanyak RM50.

D) Cash Withdrawal Charges / Caj Pengeluaran Tunai

A one-time fee of 5% or a minimum of RM10 will be levied on the amount withdrawn. Profit Charge is calculated from the day of withdrawal until full payment. / 5% daripada jumlah yang dikeluarkan atau minima RM10, yang mana lebih tinggi. Ini dikenakan bagi setiap urus niaga pengeluaran tunai.

E) Minimum Monthly Payment / Bayaran Bulanan Minima

5% of the outstanding balance or a minimum of RM25 payment. / 5% daripada baki belum jelas atau minima RM25.

F) Conversion for Overseas Transactions / Tukaran bagi Urus Niaga Luar Negara

Transactions conducted outside Malaysia will be converted to Ringgit Malaysia on the date the transaction is received and/or processed. The exchange rate may differ from the rate charged on the date of transaction due to market fluctuation. Exchange rate will be based on the rate determined by or Visa International at such time. / Urus niaga yang dilakukan di luar Malaysia akan ditukar kepada Ringgit Malaysia pada tarikh butiran diterima dan/atau diproses. Kadar penukaran mungkin berbeza daripada kadar harian urus niaga kerana turun naik pasaran. Kadar tukaran adalah berdasarkan kadar yang ditentukan oleh Visa International pada waktu tersebut.

For Bank's Use / Untuk Kegunaan Bank			
Name / Nama FE/CS/RB/ISE/TSE:			
PF No. / No PF			
Branch / Cawangan			Tel. No. / No. Tel (/)-
Branch Code / Kod Cawangan			Tel. No. / No. Faks (/)-
Introduced by / Diperkenalkan oleh (Lead Generator)			
PF No. / No PF			
Branch / Cawangan			Tel. No. / No. Tel (/)-
Branch Code / Kod Cawangan			Tel. No. / No. Faks (/)-

Send your Application Form to / Hantarkan Borang Permohonan anda kepada:

MAYBANKARD CENTRE

7th Floor, Menara Maybank, 100 Jalan Tun Perak, 50050 Kuala Lumpur. Tel: 1300 88 6688 (or your nearest Maybank branch / atau ke cawangan Maybank berdekatan anda)

KEMENTERIAN KEMUDAHAN AWAM
MINISTRY OF PUBLIC UTILITIES

Tingkat 2, Wisma Sumber Alam, Jalan Stadium, Petra Jaya, 93050 Kuching, Sarawak

Permohonan Untuk Projek Bekalan Elektrik Luar Bandar (BELB)
Application For Rural Electrification Scheme (RES) Project

Arahan (Instruction) :

1. Sila Lengkapkan Bahagian A dan B dalam Borang ini.
Please complete Part A and B of this form
2. Sertakan satu salinan Kad Pengenalan Wakil Pemohon (Contoh : Pengerusi JKKK / Ketua kampung / Tuai Rumah).
Attach a copy of Identification Card of applicants' representative (Example : JKKK Chairman / Ketua Kampung / Tuai Rumah).
3. Sertakan satu lakaran / lukisan yang menunjukkan kedudukan kampung / rumah panjang dan nombor lot rumah pemohon dengan jalan dan petunjuk penting seperti tasik, bukit, sungai, ladang, talian elektrik SESCo dan lain-lain.
Attach a copy of sketch or drawing showing the location of the village / longhouse and the lot number of applicants' houses in relation to roads and identifiable landmarks such as ponds, hills, river, field, SESCo line and etc.
4. Butir-butir semua pemohon hendaklah disenaraikan dalam jadual Senarai Butir-butir Pemohon-pemohon. Muka surat ini boleh difotokopi jika ia tidak mencukupi.
All applicants' particular must be listed in the table of List Applicants' Particulars. This page can be photocopied if it is not sufficient.
5. Borang yang telah diisi dengan lengkap perlu dihantar ke Pejabat Daerah Berkenaan. Bahagian C hendaklah diisi oleh Pegawai Daerah.
The completed form is to be submitted to the relevant District Office. Part C must be completed by the District Officer.
6. Bahagian D hendaklah diisi oleh Ahli Parlimen / Ahli Dewan Undangan Negeri kawasan berkenaan.
Part D is to be completed by the relevant honourable Member of Parliament / Member of Dewan Undangan Negeri for the constituency.
7. Pejabat Daerah bertanggungjawab menghantar borang yang telah lengkap melalui Pejabat Residen ke Kementerian Kemudahan Awam beralamat seperti di atas. Pejabat Residen dikehendaki mengisi Bahagian E.
The District Office is responsible to submit the completed form through the Resident Office to the Ministry of Public Utilities at the address stated above. Resident should complete Part E.

A Butir-butir Kampung / Rumah Panjang (Detail of Village / Longhouse)	
Nama Kampung / Rumah Panjang* Name of Village / Longhouse* _____	
Alamat Kampung / Rumah Panjang* Address of Village / Longhouse* _____	
Daerah District _____	Bahagian Division _____
Kawasan DUN DUN Constituency _____	Kawasan Parlimen Parliament Constituency _____
Jenis Permohonan Type of application _____	Bekalan elektrik ke rumah / lampu jalan / kedua-dua sekali* Electricity supply to house / street lighting / both* _____
Bilangan rumah / pintu / keluarga yang memohon bekalan elektrik (jika berkenan) Number of houses / doors / families applying for electricity supply (if applicable) _____	Nama Bandar / Pekan terdekat Name of the nearest town _____
Berapa jauh kampung / rumah panjang itu dari talian SESCo yang terdekat (jika ada) ? How far is the village / longhouse from the nearest SESCo line (if any) ? _____ (km)	

* Batalkan mana-mana yang tidak berkenaan (Delete where inapplicable)

B. Butir-butir Wakil Pemohon-pemohon (<i>Particulars of Applicants Representative</i>)	
Nama Orang Yang Bertanggungjawab <i>Name of Person-In-Charge</i> _____	
Jawatan <i>Position</i>	Pengerusi JKKK / Ketua Kampung / Tuai Rumah / Penghulu / Kapitan / Lain-lain (nyatakan)* _____
No. KP (Sila lampirkan salinan) <i>IC No. (please attach a photocopy)</i>	No. Telefon <i>Contact no.</i>
Alamat Surat-menyurat <i>Postal Address</i> _____ _____	
Saya mengesahkan bahawa semua maklumat yang diberikan di dalam Bahagian A dan B serta senarai Butir-butir Pemohon-pemohon adalah benar. Permohonan ini akan ditolak jika mana-mana maklumat didapati adalah palsu, tidak lengkap atau maklumat yang diperlukan tidak disertakan. <i>I hereby declare that all information given in Part A, Part B and the list of Applicants' Particular is correct. This application will be rejected if any information is found to be false, incomplete or appropriated copies of information are not attached.</i>	
Tandatangan (<i>Signature</i>) _____ Tarikh (<i>Date</i>) _____	

C. Pengesahan Pegawai Daerah (<i>District Officer Confirmation</i>)	D. Sokongan Ahli Parlimen / Ahli Dewan Undangan Negeri (<i>Support by Member of Parliament / Member of DUN</i>)
Saya mengesahkan bahawa kampung / rumah panjang ini bukan setinggan atau kediaman yang tidak boleh didiami. <i>I confirm that the village / longhouse above is not a squatter or uninhabitable structure.</i>	Saya menyokong permohonan ini. <i>I support this application.</i>
Tandatangan (<i>Signature</i>) _____	Tandatangan (<i>Signature</i>) _____
Tarikh (<i>Date</i>) :	Tarikh (<i>Date</i>) :
Nama (<i>Name</i>) :	Nama (<i>Name</i>) :
No. KP (<i>IC No.</i>) :	Kawasan DUN / Parlimen :
Dacrah (<i>District</i>) :	Cop Rasmi (<i>Official Stamp</i>) :
E. Diterima Oleh Pejabat Residen (<i>Received By Resident Office</i>)	
Diterima Oleh : <i>Received By :</i>	Nama (<i>Name</i>) :
Tandatangan (<i>Signature</i>) _____	No. KP (<i>IC No.</i>) :
Tarikh (<i>Date</i>) :	Cop Rasmi (<i>Official Stamp</i>) :

• Batalkan mana-mana yang tidak berkenaan (*Delete where inapplicable*)

Senarai Butir-butir Pemohon-pemohon (List of Applicants' Particulars)

Peringatan : Satu lakaran / lukisan yang menunjukkan kedudukan kampung / rumah panjang dan nombor lot rumah pemohon-pemohon dengan jalan dan petunjuk penting seperti tasik, bukit, sungai, ladang, talian elektrik SESCo dan lain-lain perlu disertakan bersama permohonan.

Reminder : A copy of sketch or drawing showing the location of the village / longhouse and the lot number of applicants' houses in relation to roads and identifiable landmarks such as ponds, hills, river, field, SESCo line and etc has to be submitted with the application.

No .	Nama Pemohon (Name of Applicant)	No. K.P. (I.C. No)	No. Lot Rumah Seperti Dalam Lukisan / Lakaran (Lot No. Of Houses As In Drawing / Sketch)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			

Sila fotokopi muka surat ini untuk pemohon-pemohon tambahan
Please photocopy this page for additional applicants

BORANG PERMOHONAN BEKALAN AIR DAN ELEKTRIK

BEKALAN DIPOHON

(i) Jenis

☐

Air

☐

Elektrik

(ii) Secara

☐

Tetap

☐

Sementara (Sila nyatakan kegunaan)

(1)

(2)

BUTIR-BUTIR PERMOHONAN

1. Nama

:

2. Alamat Surat

:

3. No. Kad Pengenalan

:

4. No. Telefon :

5. Warganegara

:

BUTIR-BUTIR PENYAMBUNGAN

Lokasi

:

☐

Rumah Kampung

☐

Lain-lain (Nyatakan) :

☐

Rumah Sesebuah

BUTIR-BUTIR PENYAMBUNGAN

1. Rumah telah siap dibina

2. 1 salinan kad pengenalan

3. 1 salinan kelulusan rumah / bil kadaran cukai tahunan PL disokong dengan surat daripada Ketua Kampung bahawa rumah telah lama dibina

4. Pelan Lokasi

5. Lain-lain dokumen yang berkaitan

Untuk Kegunaan Pejabat Sahaja

☐

☐

☐

☐

☐

Permohonan yang tidak lengkap akan ditolak.

Saya mengaku bahawa keterangan yang dinyatakan adalah benar dan bertanggungjawab sepenuhnya di atas semua perkara berkaitan penyambungan bekalan ini.

Tandatangan

:

Tarikh

:

ELECTRICITY ORDINANCE

ELECTRICITY RULES, 1999

FORM B

(Rule 7)

APPLICATION FOR REGISTRATION OF AN INSTALLATION

I/We, ,
the owner/management of the installation
..... at
..... , hereby apply for a
Certificate of Registration for the installation under rule 7 of the Electricity Rules, 1999.

The installation consists of the following apparatus. *

.....
Owner/Management

-
- * This list is to contain full details of the apparatus on which the fee is to be assessed as prescribed in Part II of the Second Schedule, together with any other apparatus.

If the list is unduly long, it may be given on a separate sheet or sheets of paper attached to this application.

Tank No. _____ Daft. No. _____



LEMBAGA AIR KUCHING
BORANG PERMOHONAN BEKALAN AIR

A	MAKLUMAT PEMOHON
---	------------------

1. Nama Pengguna:
(Name of Consumer)
2. No. Kad Pengemalan:
(I.C. No.)
3. Alamat Premis yang Memerlukan Bekalan Air:
(Address of premise that required water supply)
4. Alamat Surat-menyurat:
(Correspondence Address)
5. No. Telefon (Pejabat):
(Office Tel. No.)
- (Rumah) :
(House)
6. Jenis Bekalan :
(Type of Supply)
- Rumah Kediaman/Perniagaan/ Kerajaan/
Rumah Ibadat
(Domestic/Commercial/Government/
Religious Institution)

Saya memohon untuk dipasang paip air ke premis tersebut di atas dan melantik Tukang Paip yang namanya tertera untuk mewakili saya dalam urusan ini

(I hereby appoint the following licensed pipefitter to apply on my behalf a supply of water to the premises at the above address.)

Tantangan Penggunaan

Cop Syarikat: Tarikh:
(Consumer's Signature/and Company Stamp) (Date)

* Polong mana yang tidak berkenaan.
(Delete whichever not applicable)

KEGUNAAN PEJABAT

Pernohonan disertai dengan dokumen tersebut

 Surat hakmilik tanah/Surat Pengesahan Penghulu

☐ Pelan tapak/Pelan Kawasan

☐ Salinan fotostat KP Pengguna

Tunggakan Bil disemak: RM.....

Tarikh Akaun:

No. Akun:

Kod Zon.....

Klasifikasi:.....

Cecar (Collateral): RM

Sumbangan Modal: RM 1,000,000.00

Paip Sambungan: RM.....

Ansuran Pertama: RM.....

Ansuran bagi Bakinovac RML

No. Meter:

Saiz Meter

Jenis Meter

Tarikh Dicoasang:

Tapak diperiksa dan Penganggaran Kos oleh...

Perjanjian Bekalan Air
diterima dan dikepikan pada.....

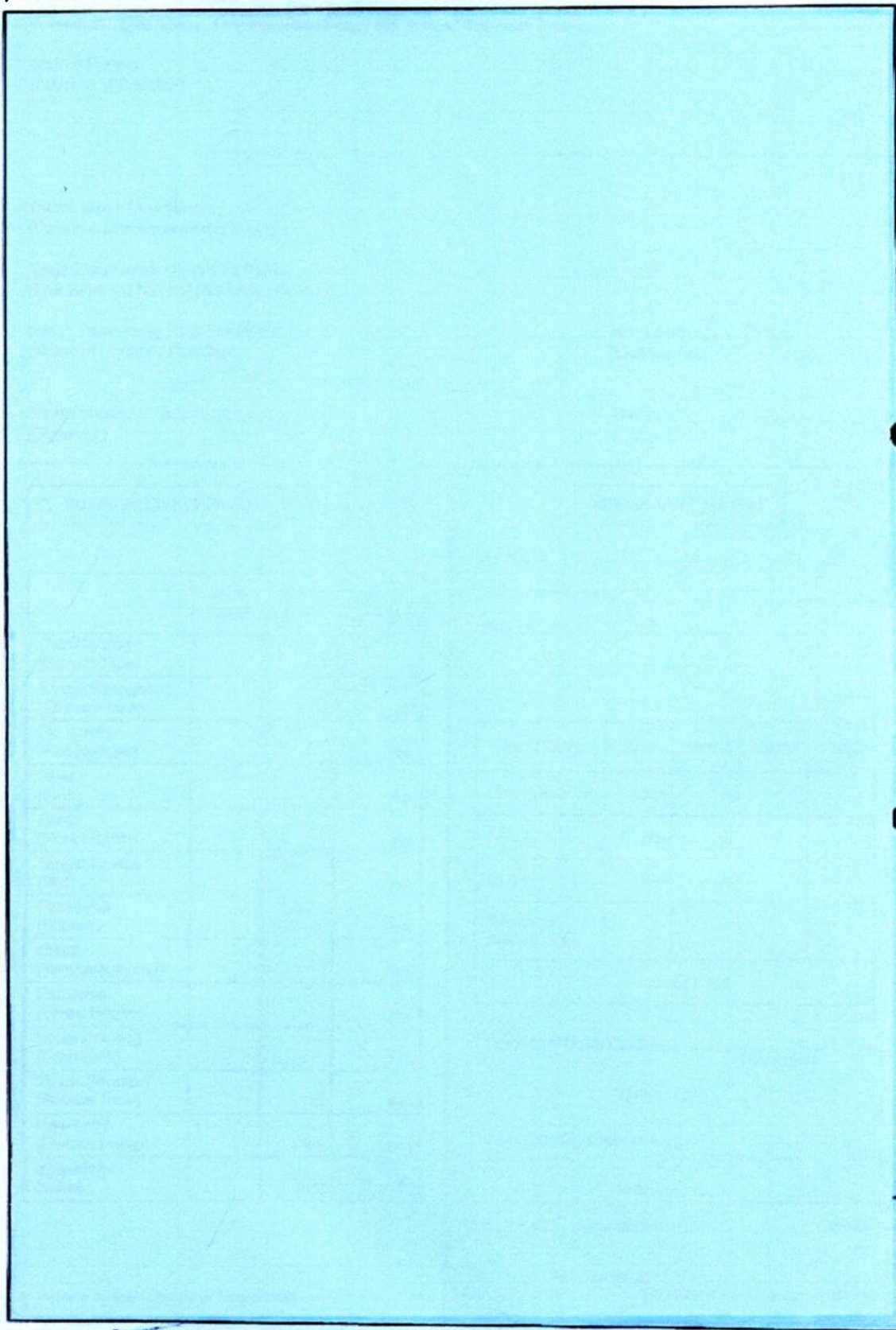
Refer Type Out Notes: Attached. Include them to the below

90. Pemohon dikehendaki mematuhi Ordinan Air, 1994 dan Peraturan-peraturan Bekalan Air, 1995 seperti yang sesuai. Salinan-salinan peraturan tersebut boleh dipaparkan di pejabat ini (seperti) atas yang tercantum di atas) pada waktu bekerja biasa.
(The applicant will be required to comply with the provisions of the Water Ordinance, 1994 and the Water Supply Regulations, 1995 as applicable. Copies of these publications may be inspected at this office (address as above) during normal working hours.)

(b) Hanya pemasangan paip yang telah diberi lesen di Pejabat Berair atau pejabat Lembaga yang diberi kuasa boleh dilakukan atas-tugas yang berkaitan dengan pembinaan, pengubahan atau pembaikan paip-paip air atau pemasangan-paip penyalar air yang dibekalkan oleh Lembaga. Senarai nama-nama pemasangan paip yang berlesen boleh didapati di pejabat Lembaga.
(Only pipelayers licensed by the State Water Authority or authorised officers of the Board shall carry out any work connected with constructing, altering or replacing of water pipes or fittings which carry water supplied by the Board. A list of licensed pipelayers may be seen at the office of the Board.)

(K) Borang "Perjanjian Bekalan Air" akan dipaparkan kepada orang/benda/perusahaan yang namanya dinyatakan dalam perkara 1 di atas.
(The form "Agreement for Supply of Water" will be forwarded to the person/company/institution named at item 1 above.)

Kemukakan petan tapak yang menunjukkan premis yang akan dibekalkan air.
(Berikan nombor Lot dan Seksyen dan nama jalan yang paling dekat).
Sketch plan showing location of premises for which supply is required.
(Give Lot and Section numbers and where possible nearest "named" road, etc.)



B. NOTIS CADANGAN KERJA PEMBEKALAN AIR (Diisi oleh Pemasang Paip)

Saya, dengan ini, memberi notis untuk menjalankan kerja penyambungan paip di:-
(I, herewith, give notice of my intention to carry out work on the water supply)

Alamat Premis:
(Address of Premise)

Tarikh Kerja Dimulakan:
(Date of Commencement of Work)

Kerja Siap Untuk Diperiksa Pada:
(The Work will be ready for inspection on)

Nama Pemasang Paip Berlesen:
(Name of Licenced Pipefitter)

No. Lesen:
(Licence No.)

Tandatangan:
(Signature)

Tarikh:
(Date)

C. BUTIR-BUTIR KERJA (Diisi oleh Pemasang Paip)

	Jenis (Type)	Saiz (Size)	Kuantiti (Quantity)
Paip Service (Service Pipe)		mm.	m
Tangki Simpanan (Storage Tank)		lit.	no.
Pili Bomba (Fire Hydrant)			no.
Sinki (Sink)			no.
Basin (Wash Basin)			no.
Tangki Tandas (W.C.)			no.
Pemancur (Shower)			no.
Urinal (Tempat Kencing)			no.
Pemanas (Water Heater)			no.
Kolah Panjang (Long Bath)			no.
Tangki Sedutan (Suction Tank)		lit.	no.
Pam Elektrik (Electric Pump)		kw.	no.
linjap Meter (Valve)		mm.	no.

* Potong mana yang tidak berkenaan.
(Delete whichever not applicable)

KEGUNAAN PEJABAT

No. Fail:

Tarikh Pemeriksaan:

Ulasan:

Jenis Kerja	Saiz	Kuantiti	Kadar	Harga
Paip Hubungan	mm	m		
Ferrule	mm	no.		
Saddle	mm	no.		
Tambahan Potong Jalan				
Jumlah: RM				

* Disokong/Tidak Disokong
Pemeriksa

Tarikh:

* Didulus/Tidak Didulus
Jurutera

Tarikh:

Pengesahan Kerja Siap Pada tarikh

Pegawai Yang Menjaga
(JT/TKN) (Tandatangan & tarikh)

Jurutera (Tandatangan & tarikh)