



1103339-U

DM Corporate Holding (M) Sdn Bhd

No 20-A Jalan BRP 1/2 Bukit Rahman Putra 47000 Selangor Darul Ehsan
Tel : 603-61488262 | 603-61562933 | 603-67311393 Fax: 603-27702527
Mobile No : 019-3260345 | 019-3698122
Website : www.registercompany.com.my | www.daftarsyarikat.com.my
E-Mail : sales@registercompany.com.my | dmcorporatesb@gmail.com

COMPANY REGISTRATION FORM

TYPE OF COMPANY	
NEW REGISTRATION	PRICE : RM 2200.00
Appointment Of Company Secretary	RM 720.00
TOTAL AMOUNT	RM 2920.00
PROPOSED COMPANY NAME	COMPANY ACTIVITIES
1.	1.
2.	2.
3.	3.

REGISTRATION STEP	DURATION
Company Name Search Application	1-3 Working Days
Company Registration	1-3 Working Days
Preparation and Submission of Documents	1-3 Working Days

PLEASE TICK	
Authorised Capital	Start From RM 400,000
Total Paid-Up Capital	RM
Have you been charged in court?	Yes <input type="checkbox"/> No <input type="checkbox"/>



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FIRST PROMOTER DETAILS - COMPULSORY		
PLEASE TICK WHICH APPLICABLE		
Director	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Shareholder	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Equity	Total Unit:	Percentage: %
Full Name:	Birth Of Date: _ _ - _ - _ _ _ _	
Address:	IC No: _ _ - _ - _ - _ - _ - PR No: _ _ - _ - _ - _ - _ - PP No: _ _ - _ - _ - _ - _ -	
Postcode	City:	State:
Phone:	E-mail:	

SECOND PROMOTER DETAILS - COMPULSORY		
PLEASE TICK WHICH APPLICABLE		
Director	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Shareholder	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Equity	Total Unit:	Percentage: %
Full Name:	Birth Of Date: _ _ - _ - _ _ _ _	
Address:	IC No: _ _ - _ - _ - _ - _ - PR No: _ _ - _ - _ - _ - _ - PP No: _ _ - _ - _ - _ - _ -	
Postcode	City:	State:
Phone:	E-mail:	



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THIRD PROMOTER DETAILS - COMPULSORY

PLEASE TICK WHICH APPLICABLE

Director Yes No

Shareholder Yes No

Equity Total Unit: Percentage: %

Full Name: Birth Of Date: _ _ - _ _ - _ _ _ _

Address: IC No: _ _ _ _ _ - _ _ - _ _
PR No: _ _ _ _ _ - _ _ - _ _
PP No: _ _ _ _ _ - _ _ - _ _

Poscode City: State:

Phone: E-mail:

FOURTH PROMOTER DETAILS - COMPULSORY

PLEASE TICK WHICH APPLICABLE

Director Yes No

Shareholder Yes No

Equity Total Unit: Percentage: %

Full Name: Birth Of Date: _ _ - _ _ - _ _ _ _

Address: IC No: _ _ _ _ _ - _ _ - _ _
PR No: _ _ _ _ _ - _ _ - _ _
PP No: _ _ _ _ _ - _ _ - _ _

Poscode City: State:

Phone: E-mail:



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PAYMENT DETAILS

Banker Name	Account No	Swift Code
Public Bank Berhad	3811766201	PBBEMYKL
PAYMENT METHOD		
Cash	Yes	<input type="checkbox"/>
Cheque	Yes	<input type="checkbox"/>
Telegraphic Transfer	Yes	<input type="checkbox"/>
Total Paid	RM	
Please attach payment slip.		
Please attach NRIC , Permanent Resident Or Passport Copy.		
E.mail : sales@registercompany.com.my dmcorporatesb@gmail.com		

DISCLAIMER AND SIGNATURE

I represent all the applicants admit evidence given on this form is true to the best of my knowledge.

Signature

Date