



Laundry for **SMART** people

Dimiliki oleh YASMIN SMART WASH SDN BHD

Kedai Dobi Francais

APPLICATION FORM TO BECOME A FRANCHISEE FOR Smart Wash Sdn Bhd

REMINDER

- PLEASE READ THE GUIDELINES CAREFULLY BEFORE FILLING IN THIS FORM.
- PLEASE COMPLETE THE FORM IN A TYPEWRITTEN FORMAT.
- PLEASE **ATTACH** ALL NECESSARY DOCUMENTS.
- INCOMPLETE APPLICATIONS WILL BE **REJECTED**.
- THE FORM HAS TO BE SUBMITTED TOGETHER WITH A PROCESSING FEE OF _____. PAYMENT CAN BE MADE TO "**SMART WASH SDN BHD**" AT THE FOLLOWING ADDRESS:

MANAGER
 Smart Wash Sdn. Bhd.
 Pusat Perdagangan Phileo Damansara 1,
 Block B, Unit 103,
 NO 9, Jalan 16/11, Off Jalan Damansara,
 46350 Petaling Jaya, Selangor
 Tel: 03 7958 2022
 Fax: 03 7958 4011

Attn: THE MANAGER

- DRY CLEANING PACKAGE
- PREMIER PACKAGE
- BUSINESS PACKAGE
- BUDGET PACKAGE
- ECONOMY PACKAGE

APPLICATION STATUS (MARK X)

NEW APPLICATION	
RENEWAL	

FOR OFFICE USE

DETAILS	PAYMENT RECEIVED		OFFICER'S SIGNATURE
	PROCESSING FEE	LICENSE FEE	
Date Received			
Crossed cheque, postal order, money order or bank draft number and date			
Receipt no./date			
License no.			

A. DETAILS OF APPLICANT

1. Company Name:
2. Company/Business Registration No.:
3. Date Incorporated:
4. Registered Address:
.....
.....
..... Postal Code:
- Telephone No.: Fax No. :
- Fax No.:
5. Operation Address:
.....
.....
..... Postal Code:
- Telephone No.: Fax No. :
6. Company website (if any):.....

B. DETAILS ON CAPITAL, DIRECTORS, SHAREHOLDERS AND MANAGEMENT OF THE COMPANY

1. Company's Capital
 - (a) Authorised Capital:
 - (b) Paid Up Capital :

2. Information on Directors

No.	Name	Identity Card No. / Passport No.	Nationality

3. Information on Shareholders

No.	Name/Institution	Identity Card No. /Passport No.	Bumiputera (B) / Non- Bumiputera (NB) / Foreign (F)	Percentage of Shares

4. Changes in shareholding (For renewal applications only)
 - (a) Were there any recent changes in shareholding?
(Yes / No)
 - (b) If yes, please provide further details

5. Please provide the latest copy of the following forms
 - (a) Form 24 (Return of Allotment of Shares)
 - (b) Form 32A (Transfer of Securities)
 - (c) Form 49 (Registered of Directors, Managers and Secretary)

6. Name of company managers

Name	Title	Telephone no./ e-mail
(a)
(b)
(c)
(d)

C. FINANCIAL POSITION

1. The company's financial position (Last three years)

	Year 200...	Year 200...	Year 200...
Gross Income			
Cost of Operations			
Profit/Loss from Operations			
Profit/Loss After Tax			
Capital Expenditure (CAPEX)			
Fixed assets			
Current assets			
Cash			
Current liabilities			
Share capital			
Reserves			
Shareholders equity			

2. Please provide audited financial report for the last 3 years.

3. Please provide bank statements for the last three months (for new applications only)
4. Bank account information;

	Name of Bank	Address	Account No.
(a)
(b)
(c)

D. OPERATIONAL INFORMATION

1. Type of services provided (Mark (X) where applicable)

Wet & Wash	
Dry Cleaning	
Ironing	
Logistics	
Others	

2. Volume of consignment

	Year 200...	Year 200...	Year 200...
Wet & Wash			
Dry CLeaning			

3. Branches and agents

(a) No. of branches

(b) Details regarding branches (Please use additional sheet)

(c) No. of Appointed Agents

(d) Agents' details (please use additional sheet)

4. Human resources

(a) No. of Workers

5. Vehicles (Please state number of company vehicles)

Motorcycle	
Van/Car	
Lorry (Various sizes)	

6. Information Technology (Mark (X) if the company provide the relevant service)

Company website	
Tracking and Tracing system	
Others (please state)	

7. Rates charged for services (Please attach document)

E. INFORMATION ON SERVICE STANDARDS AND CUSTOMER SERVICE

1. Please state the standard of service provided by the company (Please attach document)

2. Does the company evaluate the quality of services provided? (Yes/No)

3. Please state the number of complaints received in the past year;

4. Please state the number of complaints resolved last year;

5. What is the maximum liability limit for the services provided by the company?

6. Does the company provide an insurance scheme for the services provided? (Yes/No)
7. Please state the company's plans to improve services provided (Please use an attachment)

F. DECLARATION

- (a) I/we hereby declare to the best of my/our knowledge that I/we believe the information provided in the application and its attachments to be true. I/we hereby authorize Smart Wash Sdn Bhd to refer/verify the accuracy of any statements in the form or attachments with me/us or any relevant third parties.
- (b) I/we authorize representatives of Smart Wash Sdn Bhd to make an inspection visit to the premise/company and examine the relevant documents.
- (c) I/we also understand that the failure to adhere to any of the requirements above would enable Smart Wash Sdn Bhd to reject my/our applications.

Signature :
(Board Member)

Name :

Title :

Company Stamp :

Date :