POS Digicert

CREDIT APPLICATION FORM

Pos Digicert Sdn. Bhd. (199801001482) License No. LPBP-1/2020(4)
8-3A-02, Star Central, Lingkaran Cyberpoint Timur, 63000 Cyberjaya, Selangor Darul Ehsan

INSTRUCTIONS

- This form is required if you are submitting a Purchase Order, Local Order, or Signed Quotation **ONLY**.
- Applicant must complete this form and submit it to Pos Digicert.
- **Organisation** refers to any group or entity formed to achieve specific goals, including Business Organisations, Government Organisations, Non-profit Organisations, Educational Institutions, Cultural Bodies, and more.
- If your Full Name, Telephone Number, Email Address, Organization Name, and Billing Address are the same as those submitted in your certificate application form, you may select "Same Information as Certificate Application Form" to omit re-entering these details. If the information differs, please complete this section in full.
- The following people can sign this document on their behalf:
  1. Director
  2. General Manager (Chief Executive Officer / Chief Operating Officer / Chief Finance Officer)
- Refunds Application Policy:
  1. Refund requests must be submitted within **3 months** from the date of payment, provided that the digital certificate has not yet been issued.
  2. Please note that refunds **cannot be processed once a digital certificate has been issued**, regardless of whether it has been used or not.

SECTION 1: BILLING INFORMATION

Full Name of the Person in Charge (PIC) for billing

1. _____

2. _____

☐ Same information as per the Individual Certificate Application Form

Telephone Number of the PIC for billing

1. _____

2. _____

☐ Same information as per the Individual Certificate Application Form

Email Address of the PIC for billing

1. _____

2. _____

☐ Same information as per the Individual Certificate Application Form

Organisation Registration Number (eg: 199801001482)

_____

Date of Incorporation

_____

Tax Identification Number (TIN)

_____

Billing to

_____

Billing Name & Address

[   ]

Organisation Name & Registered Address (eg: as per SSM Document)

[   ]

SST Registration
Please provide the following documents to qualify for SST tax exemption waiver (applicable only for IT providers purchasing on behalf of their clients):

1. SST Registration Letter from Customs
2. Declaration Exemption

SST Number

_____

Note: Pos Digicert's payment term is 30 days upon invoice date.

SECTION 2: DECLARATION

Consent Authorisation Under Personal Data Protection Act 2010 ("PDPA Act") and Credit Reporting Agency Act 2010 ("CRA Act").

Pursuant to the CRA Act, I/we the undersigned do hereby give my/our consent to you and CTOS Data Systems Sdn Bhd (CTOS), a registered credit reporting agency under the CRA Act to process my/our company and personal data.By this consent, I/We understand and agree that:

You may conduct credit trade checks on us and where applicable, our directors), shareholder(s) and guarantor(s) (collectively the "Parties"), with CTOS at any time for as long as live have a trade relationship with you or where any dues remain unpaid and outstanding with you, for any one or more of the following purposes:

* Opening of account
* Credit/Account review
* Credit/Account monitoring
* Credit/Account evaluation
* Debt recovery
* Legal documentation consequent to a contract or facility granted by you.

You may disclose any information on the Parties' conduct of their accounts with you, to any business entity/les for trade checking at any time. The Parties are also aware and understand that such information will be provided to a credit reporting agency/les, who may in turn share such information to subscribers of their service.Where you require any processing of our application to be processed by any processing centre located outside Malaysia (including your Head Office), the Parties hereby give consent to CTOS to disclose their credit reports to such locations outside Malaysia.Apart from the above, the Parties undersigned do give our consent to you and the CTOS to process my/our personal data as defined under the Personal Data Protection Act 2010.

DIRECTOR SIGNATURE

Name _____

Date _____

ORGANISATION STAMP

[   ]

SECTION 3: PERSONAL DATA PROTECTION ACT (PDPA) 2010 – CONSENT CLAUSE

By submitting this Form, you hereby agree that Pos Digicert Sdn Bhd may collect, obtain, store and process your personal data that you provide in this form for the purpose of providing Certification Authority services, receiving updates, news, promotional and marketing mails or materials from Pos Digicert Sdn Bhd . You hereby give your consent to Pos Digicert Sdn Bhd to: Store and process your Personal Data; Disclose your Personal Data to the relevant governmental authorities or third parties where required by law or for legal purposes. In addition, your personal data may be transferred to any company within the Pos Digicert Sdn Bhd's parent companies and subsidiaries. For the purpose of updating or correcting such data, you may at any time apply to Pos Digicert Sdn Bhd to have access to your personal data which are stored by Pos Digicert Sdn Bhd . For the avoidance of doubt, Personal Data includes all data defined within the Personal Data Protection Act 2010 including all data you had disclosed to Pos Digicert Sdn Bhd in this Form. To view our full Data Protection Privacy Statement Notice please visit our website at *https://www.posdigicert.com.my/repository/pdpa.*

SECTION 4: INTERNAL USE ONLY (POS DIGICERT OFFICER)

Credit Limit

_____

Recommended by

Approved by

Name

Name

Designation

Designation

SECTION 5: INTERNAL USE ONLY (POS MALAYSIA OFFICER)

Checked by

Department

Designation

Customer ID