



**\*\*General Information ( \*\*Mandatory to be filled in)**

Company Name		Tel	
Billing Name <i>(If different from above)</i>		Fax	
Billing Address		Email	
Delivery Address <i>(If different from above)</i>		Company Registration No/ UEN No.	
VAT/ GST Number		Incorporation Date	

**\*\*Purchaser Contact (\*\* Mandatory to be filled in)**

1 Name		2 Name	
Designation		Designation	
Tel:		Tel:	
Fax:		Fax:	
Email		Email	

**\*\*Sales Contact**

1 Name		2 Name	
Designation		Designation	
Tel:		Tel:	
Fax:		Fax:	
Email		Email	

**\*\*System Auto Mailer**

SOA Email 1		E-Invoice Email 1	
SOA Email 2		E-Invoice Email 2	
SOA Email 3		E-Invoice Email 3	

**\*\*Company Authorization ( \*\*Mandatory to be filled in)**

Signature of authorised signatory <small>by a duly authorized representative of the customer )</small>		Company stamp	
Name			
Designation			

**\*\* Declaration\*\***

By signing this form, you understand and agree that ORAPI may collect, use and disclose your personal data as provided in this registration form for the purposes set out in policy in accordance with the Personal Data Protection Act 2012 and our data protection policy which available at <https://orapiasia.com/private-policy/>

Name :

Signature & Date :