



APPLICATION FORM EDC-BUSINESS PREMISES

1. APPLICANT INFORMATION

Name	
Matric Number	
NRIC/Passport Number	
Permanent Address	
Kulliyyah	
Contact Number	
Email	

2. DURATION OF BUSINESS

From	(dd/mm/yyyy)	
To	(dd/mm/yyyy)	

3. COMPANY INFORMATION

Name of Company	
Address	
Registration of Company/ Registration of Business No.	
Type of Business	

4. TYPE OF SERVICE CHOSEN (PLEASE TICK IN BOX)

1.	EDC Pushcarts	Student Mall (Above HS Café)	
		EDC Incubator (Glamhub) near Ground floor, Main Audi	

(Name)

I hereby verify that the above information is true and valid.

Signature :
Date :

For EDC Office Use Only	Name & Official Stamp	
	No. Pushcart to be allocated (if any)	
	Remarks / Date	