

# Product Order Form - Distributor (NZ)



Enagic New Zealand Limited  
NZBN 9429047808270  
PO Box 105 394  
Auckland City 1143 New Zealand  
E-mail: [info@enagic-australia.com](mailto:info@enagic-australia.com)

DISTRIBUTOR ID **FOR OFFICE USE ONLY**

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## Applicant Information ☐ Register as a Distributor

The personal information provided on this form is handled by Enagic New Zealand in accordance with its Privacy Collection Statement, set out with the Product Return Policy.

Name (First, Middle Initial, Last or Company Name) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Home Tel. No. \_\_\_\_\_

Mobile Tel. No. \_\_\_\_\_

E-mail Address \_\_\_\_\_

Date of Birth (DD/MM/YY) \_\_\_\_\_ Drivers Licence/Passport No. \_\_\_\_\_

**Shipping Address** ☐ same as above

☐ I agree to receive communications from Enagic New Zealand via e-mail.

## Bank Information **This is where your commissions will be paid into**

Name of Bank \_\_\_\_\_

Account Holder's Name \_\_\_\_\_

Name of Branch \_\_\_\_\_

BSB \_\_\_\_\_ Account No. \_\_\_\_\_

## Sponsor Information **Leave Blank**

Register the applicant as your [ ☐ ] A Sponsor Name: \_\_\_\_\_ Sponsor ID: \_\_\_\_\_

Product Ordered	Unit Price	GST	Shipping	Total	Payment Method
ANESPA	\$ 3230	\$ 484.50	\$	\$ 3714.50	<input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Bank Transfer <input type="checkbox"/> E-Payment <input type="checkbox"/> Other

## Credit/Debit Card Information ☐ Visa ☐ MasterCard

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Expiry Date \_\_\_\_\_

CVV \_\_\_\_\_

Card Holder's Name \_\_\_\_\_

Card Holder's Signature \_\_\_\_\_

**Leave Blank**

**X**  
Applicant Signature \_\_\_\_\_

Date (DD/MM/YY) \_\_\_\_\_

Sponsor Signature \_\_\_\_\_

Date (DD/MM/YY) \_\_\_\_\_



Enagic New Zealand Limited is a Member of the Direct Selling Association of New Zealand and Subscribes to the DSAN Code of Practice - [www.dsanz.co.nz](http://www.dsanz.co.nz)

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Account Holder's Name

Name of Branch

BSB Account No.

## Sponsor Information

**YOUR NAME**

**LEAVE BLANK**

Register the applicant as your [ ] A Sponsor Name: Sponsor ID:

Product Ordered	Unit Price	GST	Shipping	Total	Payment Method
K8	\$ 5770	\$ 865.50	\$	\$ 6635.50	<input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Bank Transfer <input type="checkbox"/> E-Payment <input type="checkbox"/> Other

## Credit/Debit Card Information ☐ Visa ☐ MasterCard

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Expiry Date

CVV

Card Holder's Name

Card Holder's Signature

**You sign here too since you're sponsoring your own K8**

**X**

Applicant Signature

Date (DD/MM/YY)

**X**

Sponsor Signature

Date (DD/MM/YY)



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**FOR OFFICE USE ONLY**  
December 2019

**PROCESSED BY:**

**DATE:**

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**YOUR NAME**

**LEAVE BLANK**

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K8	\$ 5770	\$ 865.50	\$	\$ 6635.50	<input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Bank Transfer <input type="checkbox"/> E-Payment <input type="checkbox"/> Other

## Credit/Debit Card Information ☐ Visa ☐ MasterCard

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Expiry Date \_\_\_\_\_

CVV \_\_\_\_\_

Card Holder's Name \_\_\_\_\_

Card Holder's Signature \_\_\_\_\_

**You sign here too since you're sponsoring your own K8**

**X**

**Applicant Signature**

Date (DD/MM/YY) \_\_\_\_\_

**X**

**Sponsor Signature**

Date (DD/MM/YY) \_\_\_\_\_



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December 2019

**PROCESSED BY:**

**DATE:**



## UKON CAPSULE/SOAP Application Form – Australia / New Zealand

<b>*** OFFICE USE ONLY ***</b>	<b>NEW DISTRIBUTOR ID :</b>
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<b>***Applicant Information***</b>	<b>NEW / RENEWAL</b>			
Applicant's Name:	Date of Birth:			
Applicant's Mobile Number:				
Applicant's E-mail address				
Applicant's Residential Address: <b>*** NO PO BOX ***</b>				
Postcode	State	Country:	AUSTRALIA	NEW ZEALAND
<b>Applicant bank details ** for commission purpose **</b>				
Account holder name: _____		BSB (Australia only): _____ -		
Bank name: _____		Account Number: _____		
<b>***Sponsor Information (REQUIRED)***</b>				
Sponsor Name: <b>YOUR NAME</b>		Sponsor ID/Ukon ID: <b>LEAVE BLANK</b> (for renewal)		Register as your <b>2</b> A (Please write 1A for renewal)

**\*\*Please tick the box & circle your choice(one)**

Product	SET A-1	SET A-2	SET C
<b>New / Existing Distributor</b>	<b>Ukon DD Capsule (Vegetarian)</b> 1000 capsules (100 x 10 box) <b>Total: SGD1020.00</b> (\$935+\$85 shipping fee)	<b>Ukon DD Capsule (Non-Vegetarian)</b> 1000 capsules (100 x 10 box) <b>Total: SGD1020.00</b> (\$935+\$85 shipping fee)	<b>Ukon Soap</b> 32 bars (2 boxes) <b>Total: SGD1070.00</b> (\$935+\$135 shipping fee)
<b>E8PA Member</b>	<b>Total: SGD935.00</b> (\$850+\$85 shipping fee)	<b>Total: SGD935.00</b> (\$850+\$85 shipping fee)	<b>Total: SGD985.00</b> (\$850+\$135 shipping fee)

I authorize Enagic to use the same information for renewal, and would process payment via the provided link at the end of each 4-month term unless I submit a cancellation form or updated information 1 month prior to the end of the term

<b>**Shipping Information</b> (if different from residential address above)	<b>*** NO PO BOX ***</b>			
Recipient's name:				
Recipient's mobile number:				
Recipient's Address:				
Postcode	State	Country:	AUSTRALIA	NEW ZEALAND

20220711

To: ENAGIC NEW ZEALAND LIMITED

Distributor Name **Name** \_\_\_\_\_

Distributor ID **LEAVE BLANK** \_\_\_\_\_

Address **Address** \_\_\_\_\_

\_\_\_\_\_

Home Tel. No. \_\_\_\_\_

Mobile Tel. No. **Number** \_\_\_\_\_

E-mail Address **Email** \_\_\_\_\_

I hereby confirm that I have reviewed and fully understood the above Policies and Procedures dated December 2019.

I will follow the rules provided in the Policies and Procedures.

**X**

\_\_\_\_\_

**Signature**

**Date**

\_\_\_\_\_

**Date**

\*The provisions of the above agreement and other contents of the Policies and Procedures are subject to change in accordance with the provisions of the Policies and Procedures.

**\*Commissions will be withheld until this document is signed and received by ENAGIC NEW ZEALAND LIMITED.**



## Product Return Policy and Collection statement

The law mandating legally acceptable returns is ten business days. In an effort to abide by this law, Enagic New Zealand Limited has established its Return Policy around this ten-day period. We also understand that there are extraordinary circumstances in which a longer period may be necessary.

When deciding upon approval by the Company, strict guidelines are used:

1. If the new, unused machine is returned within 10 days of receipt, you will be refunded the full amount minus postage/shipping fees.
2. If a new machine is returned more than 10 days after receipt, you will be charged with a restocking fee.\*
3. If a used machine is returned within 10 days of receipt, you will be charged with a restocking fee.\*
4. If a used machine is returned more than 10 days after receipt, you will be charged with a processing fee.\*\*
5. If a machine is returned more than 1 month after receipt, no refund is possible.
6. Shipping fees are not subject to refund.
7. Instalment charges are refunded on a pro-rated basis.
8. The owner must pack the machine securely in its original package and return at the owner's expense.

MACHINE	*RESTOCKING FEE	**PROCESSING FEE
K8	\$110	\$1010
SD501 / SD501 PLATINUM	\$110	\$840
ANESPA DX / ANESPA DX (E8PA MEMBER)	\$110	\$540/400
JRIV	\$110	\$560
SUPER 501 / SUPER 501 (E8PA MEMBER)	\$110	\$1230/1060

Days are counted starting on the day that the order was processed or in the case of shipping, begins with the date of signed delivery.

- a) Ten days are business days
- b) One month is counted as one calendar month
- c) A machine is considered used once water has been run through it

### Enagic Collection Statement

To assist us in providing our products and services, responding to inquiries and otherwise conducting our business functions and activities, we need to collect personal information about you. By providing your personal information, you agree that it will be used and disclosed by Enagic New Zealand Limited. NZBN 9429047808270 in accordance with this statement and our Privacy Policy, available at <https://enagic-australia.com/privacy-policy/>

If you do not agree, you must not provide your personal information, and we may not be able to communicate with you or provide certain products or services to you. We may disclose your personal information to other parties, including to our branches and offices around the world, and to third parties who provide products and services to us or through us in the ordinary operation, administration or promotion of our business and otherwise in accordance with our Privacy Policy. From time to time, these third parties may be located (and therefore your personal information may be disclosed) overseas, including Japan and the USA. We may use and disclose your personal information for direct marketing purposes, unless you opt out (which you can do at any time in accordance with our Privacy Policy). Our Privacy Policy contains information about how you may access and seek correction of your personal information, how you may complain about a breach of your privacy, and how we will deal with that complaint.

I have read and accept the Return Policy described above and I have read and understand the Enagic New Zealand Privacy Collection Statement set out with this Product Return Policy.

<b>Name</b>	<b>X</b>	<b>Date</b>
Name (Print)	Applicant Signature	Date



## Commission Remittance for New Zealand Distributors

### Terms and Conditions

1. All bank remittance fees including any intermediary banks, the sender's bank charges and currency conversion fees are the responsibilities of the recipients. Enagic Australia Pty Ltd accepts no responsibility for any charges.
2. All commission amounts stated are in Australian dollars. The currency exchange rate of remittance is depending on the bank. Enagic Australia Pty Ltd is not liable for any loss or delay caused by any changes in the currency exchange rate.
3. If remittance information is insufficient, invalid or incorrect, the telegraphic transfer is liable to be rejected, returned and/or delayed, usually with charges imposed. Enagic Australia Pty Ltd accepts no responsibility for any loss or damage suffered by any person arising out of such rejection, return and/or delay. Any charges imposed by the receiving bank may be deducted from the payment amount or any of your accounts.
4. Enagic Australia Pty Ltd reserves the right to revise the details of the above terms and conditions without prior notice. In any cases of dispute, Enagic Australia Pty Ltd reserves the right of final decision.

I acknowledge that I have read and accept these terms and conditions.

**Your name**

Applicant's Name (PLEASE PRINT CLEARLY): \_\_\_\_\_

**Leave Blank**

Distributor ID: \_\_\_\_\_

Applicant's Signature: **X** \_\_\_\_\_

Date Signed: \_\_\_\_\_





**Commission Bank Transfer Authorisation Form**  
**For New Zealand Distributor**

Distributor's Full Name:		Distributor ID Number: <b>Leave blank</b>
Address: (not a PO Box)		
Suburb:	City:	Post Code:
Telephone:		Contact Email Address:
<b>BANK INFORMATION</b>		
Name of Bank:		
SWIFT Code:	Bank Account Number:	
Branch Address:		
Suburb:	City:	Post Code:
Name of the Account Holder:		

Authorising Signature: By signing this document, you are authorising Bank Transfer payment method for commissions, which are to be sent to the above account.

Applicant's Name (PLEASE PRINT CLEARLY): \_\_\_\_\_

Applicant's Signature: **x** \_\_\_\_\_

Date Signed: \_\_\_\_\_

Please return this completed form to: Commission Team

[account@enagic-australia.com](mailto:account@enagic-australia.com)