





9.0 CAPITAL STRUCTURE (in Malaysian Ringgit)

9.1 Authorised Capital \_\_\_\_\_

9.2 Paid-up Capital \_\_\_\_\_

9.3 Loan Capital \_\_\_\_\_

9.4 State sources of loans  
local/foreign bank  
overdrafts, etc. \_\_\_\_\_

9.5 Equity Participation

9.5.1 Percentage (%) Local-Bumiputera 

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9.5.2 Percentage (%) Local-Non-Bumiputera 

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9.5.3 Percentage (%) Foreign - Please State Country - Percentage %

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10. EMPLOYMENT

STAFF POSITION at proposed (initial) stage of operation

Note : The State Authority requires that at least 30% of the employees at all levels of employment are Bumiputera

			Managerial & Research	Engineers	Supervisory	Technical	Other Office Staff	Skilled Workers	Unskilled workers	General workers	Total	
MALAYSIAN	MALE	Bumiputera										
		Chinese										
		Indian										
		Others										
	FEMALE	Bumiputera										
		Chinese										
		Indian										
		Others										
Expatriate												
TOTAL												

11 PRODUCTION

11.1.1 With the aid of a flow chart, explain the manufacturing processes of the plant

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11.1.2 Give details of any discharges/waste generated or produced. (air, water, etc.)

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11.1.3 Indicate treatment and disposal measures for above

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11.1.4 Please give details of the following :-

11.1.4.1 List of raw materials :

Item	Quantity Per Month
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

11.1.4.2 List of chemicals used :

Item	Quantity Per Month
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

11.1.4.3 List of production items :

Item	Quantity Per Month
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

11.1.4.4 List of equipment/machinery

Item	Quantity Per Month
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

12 GENERAL

	Equipment	Type of Fuel	Quantity Per Hour
12.1	Boiler		
12.2	Cooker		
12.3	Generator		
12.4	Incinerator		

13 MARKET

Market of your products by stating the percentage of sales in local market and export

% LOCAL

% EXPORT

Countries concerned

14 INFORMATION ON EXISTING OPERATION

14.1 Is your company currently operating in Malaysia YES  NO

If YES, please answer the following :

14.2 Are you operating in rented/owner occupied premises ?

14.3 Please state :

14.3.1 For rented premises :  
 rent per month \_\_\_\_\_  
 type of building \_\_\_\_\_  
 built-up area \_\_\_\_\_

14.3.2 For owner occupied premises : land area  
 present zoning \_\_\_\_\_  
 type of building \_\_\_\_\_  
 built-up area \_\_\_\_\_

14.4 Would your company be relocating the entire business on to the new one to be purchased from PDC and cease operation at the old location ? YES  NO

15 STATE NAME AND ADDRESS OF THE FOLLOWING :-

15.1 Your Banker

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15.2 Your Company Secretary

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15.3 Your Solicitor

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I hereby declare that to the best of my knowledge and belief all the particulars furnished above are true.

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

Signature : \_\_\_\_\_

Name : \_\_\_\_\_

Designation : \_\_\_\_\_

Company stamp :

IMPORTANT NOTE

Please attach a copy of :-

1. Memorandum of Article
2. Form 24            }
3. Form 49            } Certified by your Company Secretary
4. Form 44            }
5. Flow chart explaining the manufacturing processes.

For sole proprietorship and partnership - Please attach a copy of Business Registration Form