

INDEPENDENT DISTRIBUTOR FORM

Please complete all required informations.

Applicants Name :

Branch Office

ID. No :

Date :

Membership Type A :

☐

SILVER

☐

GOLD

☐

STOCKIST

☐

JOINT VENTURER

Contact No. :

E-Mail :

Address :

Sponsor name :

Status in CA :

Employment :

Gender :

☐

Male

☐

Female

Date Of Birth :

Emergency Contact :

Fisrt Name :

Signature :

Postcode

Phone Numbers

Important Notes and Confidentiality:

1. Review Process: Upon receiving your complete submission, the Siomai Love management team will conduct an initial review within 2 to 3 business days.
2. Interview & Territory Discussion: Shortlisted candidates will be contacted directly to schedule an in-person or virtual interview to discuss specific territorial agreements, logistics capabilities, and long-term targets.
3. Confidentiality: All information provided in this application will be held in strict confidence and used solely for the purpose of assessing your qualifications as an Exclusive Distributor for Siomai Love.

Thank you for your interest in joining our dedicated distribution network. We look forward to reviewing your proposal.