

KENANGA INTERNATIONAL CARD ACCESS FORM

MF 17-01
Rev.1

*Those with Mark * is compulsory to fill in*

Company Name *

Office Suite No. *

Office Floor *

Staff Name *

Name on Card * *(12 characteres only)*

Co. Email Address *

Employee Number

Ic Number *

Office No. * Office Ext

Hand Phone No. *

Designation. *

Recent I/C
Size Photo

1 Copy

Company Chop &
Signatures

Date

Signatures for
Collection

Date

Terms & Conditions

*Please be informed that the card is non-transferable.
RM10.00 will be charge for the lost.
Please display your access card all the time while accessing into the main lobby.*

*Those with Mark * is compulsory to fill in*

OFFICE USE ONLY			
Information Checked By :	<input type="text"/> *	Date	<input type="text"/>
Verified By:	<input type="text"/> *	Date	<input type="text"/>
Approved By:	<input type="text"/> *	Date	<input type="text"/>
CUSTOMER RELATION OFFICER / BUILDING MANAGEMENT			
Information Keyed in By	<input type="text"/>		
Date	<input type="text"/>		
Access Card Number	<input type="text"/>		