

# Product Order Form - Distributor



Enagic Australia Pty Ltd  
ABN 64 141 931 919  
Suite 15, 33 Waterloo Road  
Macquarie Park, NSW 2113, Australia  
E-mail: [info@enagic-australia.com](mailto:info@enagic-australia.com)  
Phone: 02-9878-1100 Fax: 02-9878-1200

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 Australia in accordance with its Privacy Collection Statement, set out with the Product Return Policy.

Name (First, Middle Initial, Last or Company Name)	Date of Birth (DD/MM/YY)	Drivers Licence/Passport No.	
Address	City	State	Postcode
Home Tel. No.	Mobile Tel. No.		
<input type="checkbox"/> I agree to receive communications from Enagic Australia via e-mail			
E-mail Address			

**Shipping Address** ☐ same as above

**Pick up from Enagic Australia Office** ☐ not applicable

Name of Person Picking Up \_\_\_\_\_ Signature \_\_\_\_\_

**Bank Information** This is the bank account for your commissions to go 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	\$ 3000	\$ 300	\$	\$ 3300	<input type="checkbox"/> Cash <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Bank Transfer <input type="checkbox"/> E-Payment <input type="checkbox"/> Other

<https://store.enagic.com/au/shipping/>

**Credit/Debit Card Information** ☐ Visa ☐ MasterCard

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Expiry Date \_\_\_\_\_

CVV \_\_\_\_\_

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

**Applicant Signature** **Date (DD/MM/YY)** **Sponsor Signature** **Date (DD/MM/YY)**



Enagic Australia Pty Ltd is a Member of the Direct Selling Association of Australia and Subscribes to the DSAA Code of Practice - [www.dsaa.asn.au](http://www.dsaa.asn.au)

This document will be a tax invoice for GST upon completion and payment.

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Address	City	State Postcode
Home Tel. No.	Mobile Tel. No.	
E-mail Address	<input type="checkbox"/> I agree to receive communications from Enagic Australia via e-mail	

**Shipping Address** ☐ same as above

**Pick up from Enagic Australia Office** ☐ not applicable

Name of Person Picking Up \_\_\_\_\_ Signature \_\_\_\_\_

**Bank Information** This is the bank account for your commissions to go into

Name of Bank	Account Holder's Name
Name of Branch	BSB Account No.

**Sponsor Information**

**YOUR NAME**

**LEAVE BLANK**

Register the applicant as your [1] A Sponsor Name: \_\_\_\_\_ Sponsor ID: \_\_\_\_\_

Product Ordered	Unit Price	GST	Shipping	Total	Payment Method
K8	\$ 5307	\$ 537	\$	\$ 5907	<input type="checkbox"/> Cash <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Bank Transfer <input type="checkbox"/> E-Payment <input type="checkbox"/> Other

<https://store.enagic.com/au/shipping/>

**Credit/Debit Card Information** ☐ Visa ☐ MasterCard

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Expiry Date	<input type="text"/>
										CVV	<input type="text"/>

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

X

X

**Applicant Signature**

**Date (DD/MM/YY)**

**Sponsor Signature**

**Date (DD/MM/YY)**



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This document will be a tax invoice for GST upon completion and payment.

**PROCESSED BY:**

**DATE:**

## 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 Australia Pty Ltd 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	\$100	\$900
SD501 / SD501 PLATINUM	\$100	\$750
ANESPA DX / ANESPA DX (E8PA MEMBER)	\$100	\$480 / \$360
JRIV	\$100	\$500
SUPER 501 / SUPER 501 (E8PA MEMBER)	\$100	\$1100 / \$950

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 Australia Pty. Ltd. ABN 64 141 931 919 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 Australia Privacy Collection Statement set out with this Product Return Policy.

\_\_\_\_\_  
Name (Print)

X

Applicant Signature

\_\_\_\_\_  
Date

To: Enagic Australia Pty Ltd

Distributor Name **Your 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 February 2017.

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 Australia.**



## 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 ___ 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: SGD1039.58</b> (\$934.58+\$105 shipping fee)	<b>Ukon DD Capsule (Non-Vegetarian)</b> 1000 capsules (100 x 10 box) <b>Total: SGD1039.58</b> (\$934.58+\$105 shipping fee)	<b>Ukon Soap</b> 32 bars (2 boxes) <b>Total: SGD1089.58</b> (\$934.58+\$155 shipping fee)
<b>E8PA Member</b>	<b>Total: SGD955.00</b> (\$850+\$105 shipping fee)	<b>Total: SGD955.00</b> (\$850+\$105 shipping fee)	<b>Total: SGD1005.00</b> (\$850+\$155 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



## **Terms and Conditions**

1. You need to be enrolled in Ukon program in order to receive Ukon commission from sales made in your downline(s). Your Ukon account has to be active (renewal/repeat purchase) to receive Ukon commission.
2. Ukon DD program allows distributors to maintain their special point (SP) status for 120 days.
3. New Ukon ID number will be issued for first time purchase. If Ukon DD is not repeated/renewed for more than two times, it will be terminated. For example, if the distributor has made 1 purchase with 2 renewals, then it will not be terminated (permanent account).
4. I understand and agree that to change information regarding selected product or shipping address, I must submit the form with new updated information 1 month prior to the renewal date.
5. Applicant may receive email or text message reminder when their subscription is due to renew however it is Distributor's responsibility to renew on time
6. After being terminated, the distributors will not be qualified to receive commission from any Ukon sales.
7. Once the Ukon DD account becomes permanent and you discontinue your renewal/repeat purchase, your special point (SP) and machine commission will depend on your last direct machine sale.
8. Three (3) Ukon DD sales will count as one machine sale in regards to the 6A title incentive bonus.
9. The recipient of an international shipment may be subject to such import fees, GST or VAT which are levied once a shipment reaches your country, additional charges for customs clearance must be borne by the recipient. Custom policies vary widely from country to country; you should contact your local customs office for further information. When customs clearance procedures are required, it can cause delays beyond our original delivery estimate.
10. For any delivery failure caused by incorrect or incomplete shipping details, the Applicant is responsible to cover any additional shipping fees
11. Return Policy – Enagic Singapore PTE LTD will replace or accept return if the products are damaged. The Applicant must return the product within seven (7) days of delivery. For any return after the 7-day period, if the product is used or not damaged, we reserve the right to inquire the reasons for returning or exchanging the product, and the right to decline your request.
12. By purchasing an Ukon product you are acknowledging that the purchase is for your own personal use only. It is strictly against policies to sell, resell or on sell your Ukon products in any way or form.
13. Payment method available via online payment

I have read, understood and agreed to the terms and conditions set forth in the following documents which comprise of the contract, distributor agreement, sales contract, policies and procedures, compensation plan and products. I am of legal age in my country. I agree that any false and misleading statement(s) may result in the termination as distributor. I understand the financial reward will come from sales of products and not by recruiting people. I understand it is my responsibility as the Applicant to keep track of my next renewal due. Terms and conditions are subjected to change with or without notice.

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