

(New Company Address)

DATE:

PRESOFT (M) SDN BHD
NO: 2A-1, JALAN PUTERI 2/5,
BANDAR PUTERI PUCHONG,
47100 PUCHONG SELANGOR
TEL: 03-8068 2556
FAX:03-8060 0359

Dear Sir / Madam,

RE: REGISTRATION OF AUTOCOUNT LICENSE

I, (Name) _____ ((NRIC) _____) hereby request for the license activation of (New Company Name) _____ under the main license of (Main Company Name) _____ with Product ID of _____.

We fully understand and accept the license rule of your company that the License File given is for the above-mentioned company.

For change address use only

Please tick if you are requesting the license for change new address:
(Please attach SSM Form (with new address) and 'Change of Address Form' together with this letter.)

Your Sincerely,

(Main Company Stamp & Signature)

Name:

Position:

(New Company Stamp & Signature)

Name:

Position:

**Your request will not be accepted if without Company Stamp

For Office Use Only

Checked by: _____

Approved by: _____

Support Agent: _____

Sales Agent: _____

Verify by: