

# NOMINATION FORM

**PLEASE NOTE:**

- Please type or fill the form using a black pen.
- All fields must be completed. Please use "N/A" to indicate "Not Applicable".
- Provide proof of non-refundable fee payment.
- Provide audited / draft / management accounts for the last 3 years.
- A detailed company profile (upon request).
- Call or WhatsApp the nomination support team at +6012-813 9168 or +6012-979 0464 for assistance.

Please tick ☒ the award you intend to nominate for:

**i. Outstanding Potential Award** ☐

**ii. Best-Of-The-Industry Awards**

- |                                                                    |                                                                         |
|--------------------------------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> Best in Manufacturing                     | <input type="checkbox"/> Best in Restaurants & Specialty Lodging        |
| <input type="checkbox"/> Best in Retail & Wholesale                | <input type="checkbox"/> Best in E-Commerce, ICT & Telecommunications   |
| <input type="checkbox"/> Best in Services                          | <input type="checkbox"/> Best in Construction & Property Development    |
| <input type="checkbox"/> Best in Agriculture & Agro-Based Industry | <input type="checkbox"/> Best in Engineering, Technology & Laboratories |
| <input type="checkbox"/> Best in Education & Training              | <input type="checkbox"/> Best in Transportation, Logistics & Storage    |
| <input type="checkbox"/> Best in Beauty & Healthcare               | <input type="checkbox"/> Best Green Initiative                          |

**iii. International Super Enterprise Awards** ☐

**A. Company Background**

Company Name: \_\_\_\_\_ Registration No: \_\_\_\_\_

Date of Incorporation: \_\_\_\_\_ Date of Commencement: \_\_\_\_\_

Business Address: \_\_\_\_\_

Principal Activity: \_\_\_\_\_

Tel. No.: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

Managing Director/Chief Executive officer:

*(State honorific titles or specific designations, if applicable.)*

No. of Staff

i. Executive level and above: \_\_\_\_\_

ii. Non-Executive: \_\_\_\_\_

Contact Person (Mr. /Ms.): \_\_\_\_\_

HP No.: \_\_\_\_\_

Email: \_\_\_\_\_

Position: \_\_\_\_\_



## B. Declaration

(to be completed by CEO/Executive Director/Authorized Person)

I declare that the information submitted in this Nomination Form is true and complete. I authorize the Organiser to verify any information, including but not limited to, information related to my/our company and/or credit standing from third-party providers such as CTOS or Credit Bureau Malaysia Sdn Bhd (CBM), as deemed necessary. I agree to adhere to the Rules and Regulations of LICTA, as well as any applicable guidelines, regulations, including but not limited to the CRA Act 2010, and the instructions of the Organiser. I hereby grant and acknowledge that this consent is irrevocable and shall remain in effect notwithstanding any changes in the law, so long as there is an existing business relationship or credit facility. I acknowledge that the database of CTOS or CBM may contain information about my/our company, and CTOS or CBM may use this information in any manner deemed necessary. I/We hereby waive all rights and shall indemnify the Organiser, CTOS, or CBM from any legal actions arising from the exercise of any activities stated above by the Organiser, CTOS, or CBM. I agree to abide by the decisions of the Selection Committee and the Organiser and understand and accept that such decisions are final and binding and shall not be contested in any court of law. Furthermore, I understand and agree that the Organiser reserves the right to rescind the Award and make public such decisions should the Organiser, at its sole discretion, determine that I have not been truthful or have failed to uphold the ethical standards befitting a recipient of the Award.

☐ We agree to the verification of our corporate information by the appointed Credit Reporting Agency (CRA) and auditor.

### Authorized Signature & Company Stamp

Name : \_\_\_\_\_  
NRIC No. : \_\_\_\_\_  
Designation : \_\_\_\_\_  
HP No. : \_\_\_\_\_  
Email : \_\_\_\_\_

## TERMS AND CONDITIONS

- The award is a recognition for qualifications, not a competition.
- All applicants and winners are strictly prohibited from making public statements about the awards without written permission.
- Once an applicant has been accepted as a nominee, it is not allowed to withdraw from the nomination.
- Any information provided by applicants/winners if discovered subsequently to be fraudulent or false, the applicant will be disqualified and the award shall be revoked.
- The organizer shall not be responsible for entries damaged or lost through the post. Proof of posting is not proof of receipt.
- The organizer shall not be liable or accountable for the protection of private and confidential information in the submissions.
- All submitted materials shall not be returned and shall remain the property of the organizers that can be used for all publications and collaterals related to the awards.
- The organizer's decisions are deemed final, conclusive and binding.
- The organizer has the right to conduct whatsoever searches on the profiles of the company and/or the directors.

## PAYMENT

A non-refundable processing fee of RM900 (for local enterprises) or RM1500 (for foreign enterprises) per application is payable upon submission.

### Processing fee payable to:

Account Name: Koperasi Pembangunan Usahawan Global Berhad  
Bank Name: Public Bank Berhad  
Account No: 321 7719 705

☐

RM900

☐

RM1500