



# Certified Translation Request Form

Please fill in your Personal Information			
Name:			
Company Name (If Any):		NRIC/Passport/FIN No.:	
Office Tel:		Mobile No.:	
Other Number:		Fax:	
Residential Address:	Singapore ( )		
Primary Email:	_____ (We will contact you with this email address)		

Please Review Your Order			
Language Pair:	Source Language	Target Language	
No. of Pages:		Type of Document & Purpose:	
Due Date:	(Date you Need the Translated Document)		
Remarks:			
Total Amount:		Deposit (If any) :	

**Terms & Conditions:**

- 1) CASH or Credit Card Payment Only
- 2) Cancellation of signed order after 3 days of confirmation will be subjected to an administrative charge of \$200.00.
- 3) Courier charges apply for delivery of document. Payment must be made via credit card or cash before delivery.

Please Sign and Kindly Fax to us @ 6827 5398 or email to <a href="mailto:certrans@elitebilingual.com">certrans@elitebilingual.com</a> , Thank You!	
Name:	Authorised Signature & Date: (with company stamp, if applicable.)

For Office Use Only			
Sales Rep Code:		Source Document Collected via Mail/Self on Date:	
Payable Amount:		Transaction Code/Cheque No./Receipt No.	
Document No.:		Certificate No.:	