



MALAYSIAN INSTITUTE
OF ACCOUNTANTS

SEARCH FORM

Membership Department
Malaysian Institute of Accountants
Dewan Akauntan, Unit 33-01, Level 33, Tower A, The Vertical, Avenue 3
Bangsar South City, No. 8 Jalan Kerinchi, 59200 Kuala Lumpur, Malaysia
Tel No: 03-2722 9000 Email: memberfirm@mia.org.my

We wish to make a request for the following information:

INDIVIDUAL MEMBERS

Full Name (as in IC): _____ Membership No: _____

Information on:

- ☐ Whether registered with the Malaysian Institute of Accountants.
- ☐ Category of membership
- ☐ Membership number
- ☐ Date of admission to the Malaysian Institute of Accountants.
- ☐ Whether sole proprietor or partner of member firm/s
- ☐ Name of member firm/s attached to
- ☐ Address and contact number of member firm/s attached to
- ☐ Current member firm/s status (active/ closed)
- ☐ Whether in possession of a valid practising certificate
- ☐ Others : _____

Purpose of request: _____

MEMBER FIRMS (AUDIT/ NON-AUDIT FIRM)

Name of Firm: _____ Firm No: _____

Information on:

- ☐ Ownership (Sole Proprietor or Partnership)
- ☐ Address and contact numbers
- ☐ Whether registered with the Malaysian Institute of Accountants
- ☐ Current status (active or closed)
- ☐ Branch/es - address and contact numbers (if any)
- ☐ Associated firm - address (if any)
- ☐ Others: _____

Purpose of request: _____

SEARCH FEE

RM 15.00

- Non-members of the Institute
- Legal Firms
- Other Commercial Firms or Institutions

FOC

- Members of the Institute
- Bank (for opening bank account and/or loan application)
- Authorized Agent for Bank (please provide copy of appointment letter from the bank – applicable only for opening bank account and/or loan application)

To be completed by applicant

Details of Applicant:

Title: Mr/ Ms/ Madam etc: _____

Name : _____

Designation : _____

Company Name: _____

Address : _____

Tel. No : _____ HP No : _____

Fax No : _____

Email address : _____

Instruction for Addressee

Please address the confirmation letter to the following recipient: *(if different than applicant)*

Title: Mr/ Ms/ Madam etc: _____

Name : _____

Designation : _____

Company's Name: _____

Address : _____

Do you want MIA to mail the confirmation letter directly to the addressee as above? (Please tick one)

Yes ☐ and email copy to applicant

No ☐ mail to applicant only

I/ We hereby agree that the information requested by myself/ us shall not be utilised for commercial purposes or for purposes of creation of a data storage base and usage of such information provided by the Institute shall be strictly confined to the purpose of such request only.

Company's stamp:

Signature: _____

Date: _____

IMPORTANT NOTES:

1. Use one Form for one (1) enquiry.
2. The Institute reserves the right to reject any application/s or limit the information provided.
3. Please enclose search fee (if applicable) together with this form.
4. An official letter will be issued in response to the search enquiry within 3 working days.

13.07.2023