



# 新加坡衛生水喉協會 SINGAPORE PLUMBING SOCIETY

BCA Braddell Campus, Block B, #02-15, 200 Braddell Road, Singapore 579700 UEN: S84SS00491  
T: (65) 6292 0111 | F: (65) 6295 6166 | E: admin@singaporeplumbingsociety.org.sg | W: www.singaporeplumbingsociety.org.sg

## MEMBERS APPLICATION & PERSONAL PARTICULARS FORM

Attach photo or Digital photo must accordance to the following specifications:

Your photograph image must :-

- 1 in colour taken against plain white background without shadows;
- 2 show the full face and without headgear.
  - \* headgear worn in accordance with religious or racial customs is acceptable but must not hide the facial features.
- 3 Please write down your NRIC and Membership Number at the back of your photo before you attached onto the box provided.
- 4 For electronic photo please kindly email to sps@plumbing.org.sg

Please attach your latest photo here for your new Membership Cards

Step 1: Membership No \_\_\_\_\_ LP No.: \_\_\_\_\_ Application Date: \_\_\_\_\_

Step 2: Your personal information

Surname \_\_\_\_\_ Given Name \_\_\_\_\_ Alias \_\_\_\_\_

Nationality \_\_\_\_\_ NRIC \_\_\_\_\_ Race \_\_\_\_\_

Dialect Group \_\_\_\_\_ Gender \_\_\_\_\_ D.O.B \_\_\_\_\_

Marital status \_\_\_\_\_ Religion \_\_\_\_\_

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

Homephone \_\_\_\_\_ Workphone \_\_\_\_\_ Fax \_\_\_\_\_

Address \_\_\_\_\_

Building Name \_\_\_\_\_ Postal Code \_\_\_\_\_

Step 3: Your Qualification

Highest Standard Achieved \_\_\_\_\_

School Graduate \_\_\_\_\_

Country \_\_\_\_\_ Year Graduated \_\_\_\_\_

Types of Trade Licenses Held

Licensed Water Service Plumber  Licensed Gas Service Workers

Others \_\_\_\_\_  Others \_\_\_\_\_



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### Step 4: Your Employment Detail

Company Name \_\_\_\_\_

Designation \_\_\_\_\_ Date Joined: \_\_\_\_\_

### Step 5: Types of Sanitary & Water Services Work Provided

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Home Plumbing        | <input type="checkbox"/> Industrial Plumbing | <input type="checkbox"/> Clear Choke            |
| <input type="checkbox"/> Sewer Service        | <input type="checkbox"/> Sewer Replacement   | <input type="checkbox"/> CCTV Services          |
| <input type="checkbox"/> Water Leak Detection | <input type="checkbox"/> Water Tank Cleaning | <input type="checkbox"/> Water Tank Replacement |
| <input type="checkbox"/> Others _____         |  |   |

#### Operating Day

- Monday - Friday   
  Saturday   
  Sunday / PH   
  Open Daily

#### Operating Hour

\_\_\_\_\_

### Step 6: Personal Data Protection Act

#### Important Note:

By signing this membership application & membership personal particulars form, you agree that Singapore Plumbing Society may collect, use and disclose your personal data, as provided in the membership application & membership personal particulars form, or (if applicable) obtained by our organisation as a result of your membership, for the following purposes in accordance with the Personal Data Protection Act 2012 and our data protection policy.

- Add Me To WhatsApp Group   
  Add Me To Emailing   
  Add Me To Web Listing

If you choose not to be contacted by Singapore Plumbing Society we will not be able to provide you with the latest updates. Please mark a cross inside the box below if you choose not to be contacted.

- Do Not Contact Me

*I Certify That The Above Information Given Is Correct And True To The Best Of My Knowledge*

\_\_\_\_\_ Name    \_\_\_\_\_ Signature    \_\_\_\_\_ Date

\*\*\*Please note that SPS will only publish your detail with all information provided.