



新加坡衛生水喉協會

**SINGAPORE PLUMBING SOCIETY**

3027A Ubi Road 3 #01-94 Singapore 408656 | UEN: S84SS0049K

T: (65) 6292 0111 | F: (65) 6295 6166 |

E: admin@singaporeplumbingsociety.org.sg | W: www.plumbing.org.sg

## **MEMBERS APPLICATION & PERSONAL PARTICULARS FORM**

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Attach a photo or digital photo must accordance to the following specifications.

- In color taken against a plain white background without shadows
- Full face photo without using any headgears  
(Headgear worn in accordance with religious or racial customs is **acceptable** but must **not hide** facial features)
- Please write down your NRIC and Membership Number at the back of your photo before you attached onto the box provided
- For electronic photo, kindly email to admin@singaporeplumbingsociety.org.sg

**Please attach your latest photo here for your new Membership Card**

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### **STEP 1:**

Membership No: \_\_\_\_\_ BCA/ITE: \_\_\_\_\_ Application Date: \_\_\_\_\_

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### **STEP 2: (Personal Information)**

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

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

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

Marital Status: \_\_\_\_\_ Religion: \_\_\_\_\_

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

Home: \_\_\_\_\_ Office: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_ (S) \_\_\_\_\_

Building Name: \_\_\_\_\_

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### STEP 3: (Qualifications)

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

School Graduated: \_\_\_\_\_ Country: \_\_\_\_\_

Year Graduated: \_\_\_\_\_

Types of Trade Licenses Held/Obtained:

Licensed Water Service Plumber

Licensed Gas Service Workers

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### STEP 4: (Employment Details)

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

Designation: \_\_\_\_\_ Date joined: \_\_\_\_\_

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### STEP 5: (Types of Sanitary & Water Services Work Provided)

\*\*Please tick accordingly\*\*

Home Plumbing

Industrial Plumbing

Clear Choke

Sewer Service

Sewer Replacement

CCTV Services

Water Leak Detection

Water Tank Cleaning

Water Tank Replacement

Others: \_\_\_\_\_

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Operating Days:

Monday - Friday

Saturday

Sunday/PH

24/7

Operating Hours:

\_\_\_\_\_



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**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

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\*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\*\*\*