



**ACCESS & SCAFFOLD INDUSTRY ASSOCIATION
ACCREDITED TRAINING PROVIDER (MOM)
APPLICATION FORM**

UEN : 200809157H

Training Centre: LH Construction And Machinery Leasing Pte Ltd
No 18 Kranji Road Singapore 739461
Tel : 6363 8650 / 6364 6508 Fax : 6463 6500
Email : huihsien@lhb.com.sg / training@lhb.com.sg
Website : www.lhb.com.sg

PART A: CONTACT DETAILS & COURSE INFORMATION

Name Of Company : _____ Contact Person : _____
Email : _____ Tel No : _____
Company Address : _____ Fax No : _____
_____ Hand Phone : _____

PART B: REGISTRATION DETAILS

***Please tick one!**

Course : Boom Lift Operator Course (BLOC) Scissor Lift Operator Course (SLOC) Vertical Personnal Platform Lift Operator Course (VPPOC)

Duration : 2 Night Class (1800-2200) 1 Day Class (0800-1700)

Course Date : _____

Nos	Full Name Of Participants (In Block Letters)	NRIC No. / Fin No.	Nationality	Age
1				
2				
3				
4				
5				

Asia Member Yes No If yes, Please furnish Membership No: _____

Total Course Fee : _____ Cash Cheque Cheque No : _____

Please furnish the following together with the application:

- 1) Copy of NRIC / Work Permit / Employment Pass
- 2) Passport Size Photo Of Participant(s)

* Application must be accompanied by full payment. Cheque should be crossed, marked "account payee only" Access & Scaffold Industry Association.
* Any replacement of participant must inform within 5 working days and will charge S\$30.00 per trainee (exclusive of GST).
* No postponement of participant.

Note : By registering for the course, I / We confirm the participant(s) has met the assumed skills and knowledge as spelled out in the CDA.

Signature of Approving Officer:

Company Stamp :

Name:
Date: