

Registration Form for CCTV Contractors

Instructions

Please complete the registration form and submit to:

WATER RECLAMATION (NETWORK) DEPARTMENT
 OPERATION AND MAINTENANCE DIVISION
 NETWORK MANAGEMENT BRANCH
 82 TOH GUAN ROAD EAST, #C3-08
 SINGAPORE 608575
 TEL: 6517 2215 / 6517 2221

Declaration

I, _____ (Company Representative)
 _____ (NRIC/Passport No.) of _____ (Company Name)

declare that the particulars stated in this registration form and the attachments are true and correct to the best of my knowledge and belief, and that I have not wilfully suppressed any material facts.

I confirm that I have read and understood PUB Terms of Registration before completing this Registration Form.

_____	_____	_____
Signature of Company Representative and Company Stamp	Designation	Date

Section A: Company Information (Attach bizSafe Level 3 Certificate or higher)

Name of Company			
Business Address		Postal Code	
Office No		Fax No	
ACRA Reg No		Email Address	
BizSafe Expiry Date (dd/mm/yyyy)			

*delete accordingly

Section B: Competent Personnel

(Attach photocopy of IC/Passport, Academic and Competency Certificates)

Personnel No 1

Full Name (As of NRIC/Passport)					
NRIC/Passport No.		Designation		Contact No	

Education History

S/N	Institution	Period (year)				Qualification attained
1		From		to		
2		From		to		
3		From		to		
4		From		to		
5		From		to		

CCTV Work-related Experience

S/N	Company Name	Period				Designation
1			year		month	
2			year		month	
3			year		month	
4			year		month	
5			year		month	

Certificates of Competency/Proficiency (Tick accordingly EITHER option 1 OR 2 AND option 3)

S/N	Name of Certificate	Tick
1a	CCTV Inspection of Sewer (SgSTT)	
1b	Interpretation of CCTV videos and Preparation of Reports (SgSTT)	
2	Certificate of Competency in WRc (VSEA Engineering Solutions Pte Ltd)	
3	Sewer and Manhole Cleaning (SgSTT)	

*delete accordingly

Personnel No 2

Full Name (As of NRIC/Passport)					
NRIC/Passport No.		Designation		Contact No	

Education History

S/N	Institution	Period (year)				Qualification attained
1		From		to		
2		From		to		
3		From		to		
4		From		to		
5		From		to		

CCTV Work-related Experience

S/N	Company Name	Period				Designation
1			year		month	
2			year		month	
3			year		month	
4			year		month	
5			year		month	

Certificates of Competency/Proficiency (Tick accordingly EITHER option 1 OR 2 AND option 3)

S/N	Name of Certificate	Tick
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*delete accordingly

Section C: Equipment List

Provide specification of your equipment. You may submit more than one for each equipment.
(Attach catalogue of equipment)

I. CCTV Camera

CCTV Camera No: _____

a. Make / Model: _____

b. Camera manufactured date: _____ (dd/mm/yyyy)

c. Country of Origin: _____

d. Overall Dimension

Length (mm): _____ Width (mm): _____ Height (mm): _____

e. Explosion Proof / Intrinsically Safe: Yes / No* Certified by: _____

f. Optical Zoom: x _____

g. Camera resolution: NTSC (720 x 426 pixels) / PAL (720 x 576 pixels) / HD (1280 x 720 pixels)*

h. Illumination

i. No of lamps: _____

ii. Intensity: _____ lumen

i. Pan: Yes / No* Tilt: Yes / No*

Pan Range: \pm _____^o Tilt Range: \pm _____^o

j. Inclinator: Yes / No*

Accuracy: $\pm 0.01^{\circ}$ / $\pm 0.1^{\circ}$ / $\pm 1^{\circ}$ *

k. Capable to perform in pipeline of range from _____ mm to _____ mm

*delete accordingly

I. CCTV Camera

CCTV Camera No: _____

a. Make / Model: _____

b. Camera manufactured date: _____ (dd/mm/yyyy)

c. Country of Origin: _____

d. Overall Dimension

Length (mm): _____ Width (mm): _____ Height (mm): _____

e. Explosion Proof / Intrinsically Safe: Yes / No* Certified by: _____

f. Optical Zoom: x _____

g. Camera resolution: NTSC (720 x 426 pixels) / PAL (720 x 576 pixels) / HD (1280 x 720 pixels)*

h. Illumination

i. No of lamps: _____

ii. Intensity: _____ lumen

i. Pan: Yes / No* Tilt: Yes / No*

Pan Range: \pm _____^o Tilt Range: \pm _____^o

j. Inclinometer: Yes / No*

Accuracy: $\pm 0.01^{\circ}$ / $\pm 0.1^{\circ}$ / $\pm 1^{\circ}$ *

k. Capable to perform in pipeline of range from _____ mm to _____ mm

II. Sonar

Sonar No: _____

a. Make / Model: _____

b. Camera manufactured date: _____ (dd/mm/yyyy)

c. Country of Origin: _____

d. Overall Dimension

Length (mm): _____ Width (mm): _____ Height (mm): _____

e. Explosion Proof / Intrinsically Safe: _____ Certified by: _____

f. Capable to perform in pipeline of range from _____ mm to _____ mm

g. Operating frequencies (kHz): _____ to _____

h. Minimum detectable range (mm): _____

III. Crawler

Crawler No: _____

a. Make / Model: _____

b. Crawler manufactured date: _____ (dd/mm/yyyy)

c. Country of Origin: _____

d. Overall Dimension

Length (mm): _____ Width (mm): _____ Height (mm): _____

e. Explosion Proof / Intrinsically Safe: _____ Certified by: _____

IV. Accessories

a. Laser Profiler

Laser Profiler: Yes / No*

Make / Model: _____

Laser Point: 1 / 2 / 3*

b. Cable Reel

Make / Model: _____

Maximum length (m): _____