

REGISTRATION FORM FOR COLLABORATION BETWEEN A FOREIGN ARCHITECT WITH BOA REGISTERED ARCHITECT (ON PER PROJECT BASIS)

Please complete this form using **BLOCK LETTERS** and tick boxes () where applicable

A PERSONAL PARTICULARS

Name of Applicant * Mr/Mrs/Miss/Mdm
(As in Passport) -----

* NRIC/Passport No. -----

Home Address -----

Contact No. Home: ----- Handphone: -----

Email Address -----

Nationality -----

Place / Date of Birth -----

Sex Male Female

Race Chinese Indian Malay Others _____
(Please specify)

Marital Status Single Married

Residential Status Permanent Resident Not Applicable Professional Visit Pass

Mailing Address -----

* Delete where not applicable
 Tick appropriate boxes

B OFFICE PARTICULARS

Office Name -----

Office Address -----

Office Contact No. Telephone: ----- Fax: -----

C ARCHITECTURAL QUALIFICATIONS

Qualification in Architecture -----

University -----

Country and date obtained -----

D DETAILS OF REGISTRATION

(i) Current Registration/Licensure as an architect in Home Economy:

Name of Home Economy -----

Architect Registration No.
Home Economy -----

Architect Registration Date -----

(ii) APEC Architect Registration (if any)*:

Name of Economy where
admitted to APEC Architect
Register -----

APEC Architect Registration
No. (Country of Origin) -----

APEC Architect Registration
Date -----

* Delete where not applicable

E BOA REGISTERED ARCHITECT'S DETAILS

Name -----

Registration Number -----

Office Name & Address -----

Contact No & Email -----

F PROJECT DETAILS

Project title -----

Project Address -----

Project period -----

Client -----

G Certified true copies of the following documents are attached to this application:

- (a) Registration certificate in home economy **
- (b) A copy of qualification papers (such as degree, diploma etc.) **

**Please bring along the original copies of your certificates for verification

H PAYMENT

I enclose the fee of S\$500.00 (*cash/cheque/bank draft No. _____ made payable to **Board of Architects**)

I DECLARATION

We, the undersigned, hereby declare that all the foregoing statements are true in every respect.

Signature of Applicant

Signature of BOA Registered Architect

Date

* Delete where not applicable

Note: Applicant is reminded that it is an offence to make any false or fraudulent representation or declaration, either verbally or in writing in connection with this application.

FOR OFFICIAL USE ONLY

Application received on: _____

Fee received: _____

Receipt No : _____ (Issued/Mailed)