

**ASSOCIATION OF PROCESS INDUSTRY
CORPORATE/ASSOCIATE MEMBERSHIP APPLICATION FORM**

SECTION A - TYPES OF MEMBERSHIP (Please tick the appropriate box)

CORPORATE MEMBER
One-Time Entrance Fee : S\$4000
Annual Fee : S\$1200
***Subject to prevailing GST rate**

ASSOCIATE MEMBER
One-Time Entrance Fee : S\$1800
Annual Fee : S\$1080

SECTION B - GENERAL INFORMATION

Company Name: _____

Company Address: _____

Company E-Mail Address: _____

Telephone No.: _____ Fax No: _____

Authorised Contact Person: _____ Designation: _____

Managing Director: _____ Signature & Co. Stamp: _____

Email: _____

Mobile: _____

Date: _____

SECTION C - COMPANY PROFILE

Company Registration No. : _____ Registration Date : _____

Company listed Director(s) : _____

Nature of Registration : Sole Proprietorship Partnership
 Private Public
 MNC Others (please specify) _____

Country of Origin : _____ Ownership : _____ % local _____ % foreign

Turnover of company : Year 3 (current) _____ Year 2 : _____ Year 1 : _____

Does your company has any local engineering patent filings? Yes / No (circle one)

If yes, how many of them? _____ (please specify) _____

SECTION D - PRINCIPAL ACTIVITIES (Please tick one or more appropriate boxes)

Plant Construction Maintenance Process Design
 Building Construction Equipment Installation Shop Fabrication
 Others (Please state) : _____

SECTION E - WORK TYPE (Please tick the core activities only)

<input type="checkbox"/> Bolt Tensioning	<input type="checkbox"/> Heavy Lifts	<input type="checkbox"/> Piping Work
<input type="checkbox"/> Buildings	<input type="checkbox"/> Hydrojetting	<input type="checkbox"/> Pressure Jetting
<input type="checkbox"/> Catalyst Dump/Load	<input type="checkbox"/> Inspection	<input type="checkbox"/> Refractory
<input type="checkbox"/> Plant Civil Works	<input type="checkbox"/> Instrumentation	<input type="checkbox"/> Rope Access
<input type="checkbox"/> Chemical Cleaning	<input type="checkbox"/> Insulation	<input type="checkbox"/> Rotating Equipment
<input type="checkbox"/> Electrical	<input type="checkbox"/> Leak Repairs (On-Stream)	<input type="checkbox"/> Scaffolding
<input type="checkbox"/> Engineering	<input type="checkbox"/> Machine, In-situ	<input type="checkbox"/> Sludge Treatment
<input type="checkbox"/> Exchangers	<input type="checkbox"/> Marine Work	<input type="checkbox"/> Stress Relief
<input type="checkbox"/> Fibreglass Lamination	<input type="checkbox"/> Mooring	<input type="checkbox"/> Tankages
<input type="checkbox"/> Fireproofing	<input type="checkbox"/> Non-Destructive Testing	<input type="checkbox"/> Valve Test Repairs
<input type="checkbox"/> Fixed Equipment	<input type="checkbox"/> Painting / Grit Blasting	<input type="checkbox"/> Vessel / Tank Cleaning
<input type="checkbox"/> Waste Management	<input type="checkbox"/> Welding	<input type="checkbox"/> Others: _____

SECTION F - EMPLOYMENT STRENGTH

Total Company Strength (ie., Everyone in the company, regardless of nationality) : _____

Breakdown of Total Company Strength as follow :

Company Profile	No of staff			
	PCM	Construction	Shipyard	Others (pls specify)
No. of Singaporeans :				
No. of PRs :				
No. of Employment Pass Holders :				
No. of 'S' Pass Holders :				
No. of WP Holders (NTS) :				
No. of WP Holders (TS) :				
Sub-Total :				

Total : _____

Please indicate your reason for joining membership : _____

Does your company need to apply for PCM Work Permit Holders soon after ASPRI Membership is approved?

Yes No

Educational Qualification Profile

Education Qualifications	No. of staff		
	Local	Foreign	Total
Degree / Post Graduate			
Diploma			
A' Level / ITC or equivalent			
O' Level / NTC 2 or equivalent			
Sec Level / NTC 3			
PSLE & Below			
Others			
Total			

SECTION G - MEMBERS CLIENTELE

Please state the primary process plant owner in which you are a resident contractor to :

Please indicate the names of process plant owner whom you have existing contract/s with :

Singapore Petrochemical Complex (SPC) S'pore Refining Company (SRC)
 Shell Chemicals Seraya Invista S'pore SHELL ExxonMobil
 Others plants (Please specify) : _____

Please specify the names of the main contractors whom you are their sub-contractor :

SECTION H - YOUR COMPANY'S CLIENTELE SECTORS

Please tick the appropriate category of your company's clientele (You may tick more than one)

Pharmeceuticals
 Petrochemicals
 Specialty Chemicals
 Petroleum
 Utilities
 Gas
 Incineration Plants
 Others : (Pls specify : _____)

SECTION I: ACCREDITATION ATTAINED BY YOUR CO (eg: ISO 9000, SCC, OHSAS etc)

Please state all types of accreditation attained by your company (Tick the appropriate box)

 ISO 9000 SCC OHSAS BizSAFE(Please specify level) _____

Please state other types of accreditation attained by your company

Who to liaise with	Name	Mobile No.	Designation	Email
1. For decision making:				
2. For HR matters:				
3. For business dev:				
4. For testing / training matters:				
5. For payment matters:				
6. For networking events:				

SECTION J: INTERNATIONALISATION

Does your company has any subsidiaries/ parent company in other country? (Please tick one)

 No. Yes. (Please complete the following.)

1) Company Name: _____ Country: _____

2) Company Name: _____ Country: _____

3) Company Name: _____ Country: _____

Which country(s) is your company interested to venture in?

Is your company keen for collaboration with peer ASPRI member companies?

 Yes. No. (Please state reason) : _____**SECTION K: MEMBERS' AGREEMENT NOT TO USE ASPRI'S LOGO**

On behalf of the company, I hereby acknowledge that ASPRI has communicated clearly to my company that ASPRI is the only organisation that has the exclusive right to use its logo. Hence, our company agrees not to use ASPRI's logo under any circumstances (e.g.s: company's website, printing it on our company's collaterals such as business cards, letterheads etc).

SECTION L: CONSENT FOR ASPRI TO USE MEMBERS' INFORMATION

In compliance with the Personal Data Protection Act (PDPA), we seek your consent for ASPRI to collect, use and disclose your company's data for the purpose of contacting you via the contact details provided (e.g. address, office contact number, hand phone, fax and emails) in regards to any industry updates and events organised / supported by ASPRI. ASPRI would be furnishing the relevant information of your company to relevant parties such as Marshall Cavendish for the publication of our Annual Directory of Singapore Process & Chemicals Industries so that your company will be listed for visibility and potential business leads; ASPRI-IPI on industry training related matters for upgrading of skilled workers; Centurion- Lian Beng Group / Westlite Accomodation for updates on ASPRI-Westlite Dormitory Papan. (Please tick one)

 Agree Disagree

Signature:

Date:

Name: _____

APPLICATION PROCEDURE

Points to Note :

1. Ensure all information are completely furnished.
2. Attach the following supporting documents together with completed membership application form:-
 - a)Original and updated print-out from Singapore ROC (Not more that six months from date of application)
 - b)Certified true copy of a contract/purchase order/letter of award from plant owners or main contractor. The job scope should also relate to one or more of the process skillsets. (For Corporate membership only)
 - c)Applicant company should have two ASPRI Corporate members (of good standing and been members for at least 3 consecutive years) to propose and second their application for membership in writing. Please refer to attached (For Corporate membership only)
3. Please send in the cheque payment together with this application. First payment for annual fee is pro-rated, i.e. from the month your company joins till the end of March.
4. Membership is automatically renewed annually. Unless, member company writes in to terminate membership, the company is liable to pay the running membership fees. No refund is also allowed. Any Member wishing to resign shall give one month's notice in writing to the Secretary via the Secretariat.
5. Management level are encouraged to attend the New Members' Orientation and every member company is required to attend at least 3 events per year to facilitate membership renewal.
6. Do not fax this application. Kindly make an appointment to despatch by hand this application form to :

9 Jurong Town Hall Road, #04-11, Trade Association Hub, Jurong Town Hall, Singapore 609431
(Tel: 65 6560 5051, Fax: 65 6560 9692)

SECTION M - FOR OFFICIAL USE ONLY

Membership Application : Accepted Rejected

Reasons for rejection : _____

Name : Mr Melvin Tan (Chairman, Membership & General Affairs Committee)

Signature : _____ Date of Membership Approval : _____

Membership No. : _____ Cheque Payment : _____

Eligibility to be in PCM Controlled List : Yes No

Reasons : _____

Revised as of September 2020