## **Dormitory Association of Singapore Ltd**

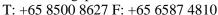
2 Seletar North Link, PPT Lodge 1B, #02-01, Singapore 797601 T: +65 8500 8627 F: +65 6587 4810



DORMITORY ASSOCIATION OF SINGAPORE LTD MEMBERSHIP APPLICATION								
APPLICANT INFORMATION								
Company Name:								
Date of Registration:	UEN NO:		Phone:					
Company address:	'		-					
(Please enclose a latest copy of the company's ACRA profile with this application)								
BUSINESS INFORMATION								
Name of Dormitory(ies) operated or	with related business:							
Dormitory address: Lease Exp			Lease Expiry (	(MMM-YY):				
Nature of services provided at the Do	ormitory (for Associate Members	s):						
Important: Please tabulate in the attached sheet below if applicant operates more than 1 dormitory.								
COMPANY'S AUTHORISED REPRESENTATIVE								
I (Name: ) on behalf of the Company agrees to abide to the By-Law of the Association								
Position:	Status: Singaporean / SPR							
Mobile Phone:	Fax:	Email:						
Signature of Representative:								
	MEMBERSHIP TYPE &	FEES (FOR 24 CA	ALENDAR MON	ITHS)				
□Dormitories with approved capacit (Ordinary Member)	☐ Dormitories with approved capacity of <b>151 to 500</b> : S\$400 (Ordinary Member)							
☐ Dormitories with approved capacity of <b>501 to 999</b> : S\$600 (Ordinary Member)		☐ Dormitories with approved capacity of <b>1,000 &amp; above</b> : S\$1,500 (Ordinary Member)						
☐ Associate Member (Non-Dormitor	y Owner / Operator): S\$400							
	APPLI	CATION SPONSO	ORS					
Application proposed by Member (Na	nme & Company):							
Application seconded by Member (Na	ame & Company):							
	EOR (	OFFICIAL USE ON	II V					
Application status: Approved / Not A		FFICIAL USL ON	1 <b>-</b> 1	)				
Signature of President/Vice President			Date:					
Signature of Secretary-General:				Date:				
Membership number:			Date:					
				Dutc.				
Remarks:								

## **Dormitory Association of Singapore Ltd**

2 Seletar North Link, PPT Lodge 1B, #02-01, Singapore 797601 T: +65 8500 8627 F: +65 6587 4810





BUSINESS INFORMATION						
S/N	Name of Dormitory	Dormitory address:	Capacity	Lease Expiry (MMM-YY)		