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| BCA Contractors Registration System  Section D2   * For ***ongoing project*** or ***ongoing term contract*** awarded less than one year ago * For CW, CR, ME and FM workheads * New or additional applications for entry or single grade * Renewal applications for all grades |
| Instructions  Please complete Section D2 and enclosed with Award Letter / Purchase or Work Orders  If your client is related to your company, please include a third-party (consultant) involved in the project  Note:  If you have many ongoing projects, each with less than $10,000 in value and awarded by the same client, you may compile them in a list and submit as one section D2 |

| **SECTION D2: TRACK RECORD *(for CW, CR, ME & FM Workheads)*** | | | | | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | | | | |
| **Company Name (Applicant) :** | | | | | | | | | | | | | | | |
| **Workhead(s) involved:** | | CW |  | CR |  | | ME |  | ME | |  | | FM |  |  | |
| Project Title (Project must be related to the workhead(s) applying for): | | | | | | | | | | | | | | | |
| Please give a description on the work done for the above project.    Provide breakdown value ($) if claiming for more than one workhead:  1. Workhead:       Value ($):      3. Workhead:       Value ($):  2. Workhead:       Value ($):      4. Workhead:       Value ($): | | | | | | | | | | | | Contract No:  (e.g. HDB P/036/99) | | | |
| If Joint Venture J.V., state name of partner(s):  1.  2. | | | | | | | | | | | | % share of J.V. | | | |
| Date of Commencement (dd/mm/yy):    (Enclose copy of Letter of Award) | | | | | | Scheduled Date of Completion (dd/mm/yy):    (Enclose copy of Letter of Award) | | | | | | | | | |
| Initial Contract Value(SGD):    (Enclose copy of Letter of Award) | | | | | |  | | | | | | | | | |
| Note: The exchange rate for all foreign currencies to SGD shall be based on the contract award date and used for all other values | | | | | | | | | | | | | | | |
| Declaration by Applicant  I hereby declare that the contract value and scheduled date of completion are correct as stated: | | | | | | | | | | | | | | | |
| Date:  Applicant Signature | | | | | Name of Officer:    Designation: | | | | | Email address:    Contact Number: | | | | | |
| **Particulars of Client / Client’s Rep Involved in Project**  Please complete either ***I*** or ***II*** only. | | | | | | | | | | | | | | | |
| ***I. Main Contract*** *(If project was awarded to your company as* ***Main Contract*** *or* ***Nominated Sub-Contract****)* | | | | | | | | | | | | | | | |
| **Details of Client/Client’s Rep** | **Name of Organisation** | | | | **Phone/Contact person** | | | | | **Email address** | | | | | |
| Architect / Consulting Engineer / Quantity Surveyor |  | | | |  | | | | |  | | | | | |
| Public Sector Agency |  | | | |  | | | | |  | | | | | |
| Developer / Business /  Home Owner |  | | | |  | | | | |  | | | | | |
| ***II. Sub-Contract*** *(If project was awarded to your company as a* ***Sub-Contract****)* | | | | | | | | | | | | | | | |
| Main Contractor that sub-contracted to your company |  | | | |  | | | | |  | | | | | |

*\* Please make duplicate copies if required.*