

SISV-APFM Accredited Managing Agents

c/o 110 Middle Road #09-00 Chiat Hong Building, Singapore 188968 Tel : 6222-3030 Fax : 6225-2453 Email : secretariat@apfm.mygbiz.com

APPLICATION FORM

Every section is to be completed. Incomplete form and/or omission of relevant supporting documents may cause delay in the processing of your application. Please ($\sqrt{}$) tick where appropriate.

New Accreditation

Category A

Re-Accreditation

Category B

For firms which are managing large commercial properties ie. industrial, office, shop or mixed developments with predominantly commercial content and community/institutional buildings with more than 50 units, and large-scale residential property developments ie. those with more than 200 units.

For firms which are managing small-scaled residential property developments ie. those with 200 and fewer units, and commercial developments with 50 and fewer units.

SECTION A – *Company's Particulars (Attach copy of ACRA Business Profile – Instant Information)						
Name of Company				Tel (Main Line)		
Registered Address of Business				Fax No		
Contact Person & Designation			Tel (DID)			
Contact Ema	Email (Compulsory)			Website address (if any)		
*Paid-up Capital (Attach copy of ACRA Business Profile – Instant Information) Category A – either a partnership or company with limited liability with a minimum paid up capital of \$100,000 Category B – at least a sole proprietor						
RCB No	Date of Incorporation			Paid Up Capital		
*Professional Indemnity Insurance with an Appropriate Coverage (Attach policy schedule front cover only)						
Insurer		Lir	nits of Liab	ility		Expiry date of Policy
SECTION B – Strata Developments Currently Managed (Attach separate sheet if necessary) #Type of Development: Commercial ; Residential ; Industrial						
MCST No	Name of Strata Development			No. of	Units	#Type of Development

SECTION C – Particulars of Director/Partner/Shareholder/Sole Proprietor				
1 Name (as in NRIC)	NRIC/Passport No			
*Position Held: Director Partner Shareholder Sole Proprietor	DOB(dd/mm/yy)			
*Affiliate to: SISV APFM NA *Membership Class: FSIS	SV 🗅 MSISV 🖵 FAPFM 🗖 MAPFM			
** Relevant Academic Qualifications (State type of Diploma/Degree, Year Obtained & Universit	y [eg. MBA 2001 Victoria Uni]			
*Experience in Property Management	xperience (years)			
2 Name (as in NRIC)	NRIC/Passport No			
*Position Held: Director Partner Shareholder Sole Proprietor	DOB(dd/mm/yy)			
*Affiliate to: SISV APFM NA *Membership Class: FSIS	SV 🗆 MSISV 💷 FAPFM 🗔 MAPFM			
** Relevant Academic Qualifications (State type of Diploma/Degree, Year Obtained & Universit *Experience in Property Management No Yes, please state no. of years of e				
3 Name (as in NRIC)	NRIC/Passport No			
3 Name (as in NRIC)	NRIC/Passport No			
 3 Name (as in NRIC) *Position Held: □ Director □ Partner □ Shareholder □ Sole Proprietor 	NRIC/Passport No DOB(dd/mm/yy)			
*Position Held: Director Partner Shareholder Sole Proprietor	·			
*Position Held: Director Partner Shareholder Sole Proprietor	DOB(dd/mm/yy)			
*Position Held: Director Partner Shareholder Sole Proprietor *Affiliate to: SISV APFM NA *Membership Class: FSIS	DOB(dd/mm/yy) SV I MSISV FAPFM MAPFM y [eg. BSc(Engrg) NTU 1996]			
*Position Held: Director Partner Shareholder Sole Proprietor *Affiliate to: SISV APFM NA *Membership Class: FSIS ** Relevant Academic Qualifications (State type of Diploma/Degree, Year Obtained & Universit	DOB(dd/mm/yy) SV I MSISV FAPFM MAPFM y [eg. BSc(Engrg) NTU 1996]			
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SECTION D - Particulars of Key Management Staff (KMS) / Employee (Attach organisation chart)

Category A: At least one Key Management Staff (KMS) holding a bachelor degree or equivalent professional qualification in the relevant field of estate or building management & has at least 5 years of work experience in property management on a full time basis; AND (i) at least one employee holding other relevant degree or equivalent professional qualification; (AND at least one (1) key management staff and one (1) staff are to pass interview tested on their knowledge in strata management and related topics.)

Category B: At least one KMS holding a diploma in the relevant field of estate and building management and has at least 5 years of work experience in property management on a full time basis.

With effect from February 2021, firms accredited under the existing AMA Scheme, new member firms and non-member firms that wish to be accredited Under Category A or B are required to have at least 30% of their staff who provide advice in strata management matters to be individually accredited when the new accreditation Scheme is implemented. For the second and third years after the first year of implementation, at least 50% and 70%, respectively, of such staff are required to be individually accredited.

1 Name	NRIC/Passport No DOB (dd/r		n/yy)	
Qualifications/ Year Obtained/University [eg.BSc(EstMan) NUS 2006]	*Member of SISV and/or APFM (tick appropriate box)			
Position Held	Date Joined	* 🗆 KMS	* Employee	
Past experience in property management				
Company Name	Last Position Held		No of Yr/Mth	
2 Name	NRIC/Passport No	DOB (dd/m	ım/yy)	
Qualifications/ Year Obtained/University [eg.BSc(EstMan) 1996 NUS]	*Member of SISV and/or A			
		APFM DM	APFM 🗆NA	
Position Held	Date Joined	* 🗖 KMS	* Employee	
Past experience in property management	·			
Company Name	Last Position Held		No of Yr/Mth	
3 Name	NRIC/Passport No	DOB (dd/m	ım/yy)	
Qualifications/ Year Obtained/University [eg Dip(Bldg) SP 1993]	*Member of SISV and/or A	PFM (tick a	ppropriate box)	
		APFM 🗆 M	APFM 🗅NA	
Position Held	Date Joined	* 🗖 KMS	* Employee	
Past experience in property management				
Company Name	Last Position Held		No of Yr/Mth	

AMA

Declaration by Applicant

- 1. I/We declare that all information stated and provided herein are true and correct.
- 2. I/We agree to abide by all the terms and conditions specified in the SISV/APFM Accreditation Scheme.
- 3. I/We will inform Secretariat of any changes to the particulars of the company's directors, Key Management Staff, etc.
- 4. *Has any of the Proprietor/Partners/Directors/Shareholders or Key Management Staff been convicted in a Court of Law

Authorised Signatory		Date	Company Stamp	
Name of Authorised Signatory		Designation		
*Checklist (ple	ease ensure that copies of all rele	evant documents are submi	tted together with the Form):	
□ ACRA E	ACRA Business Profile – Instant Information			
Pl insuration	PI insurance policy schedule (showing policy no, name of insured, limit of liability, period of cover)			
List of s	List of strata titled developments currently managed			
Organis	Organisation chart and copy of relevant academic qualifications			
Crossed cheque payable to "SISV-APFM Accreditation Account"				
Accreditation F	ees (excl GST, subject to review	/ without prior notice)		
	mber means if the Director/Partner/S	. ,	a member of SISV and/or APFM	
Category A	• Registration Fee \$540.00) (SISV/APFM member);	O \$600.00 (Non Member)	
Category B	• Registration Fee \$270.00) (SISV/APFM member);	◯ \$300.00 (Non Member)	

Re-accreditation Fees (excl GST, subject to review without prior notice)

SISV/APFM member means if the Director/Partner/Shareholder/Sole Proprietor is a member of SISV and/or APFM			
Category A	• Registration Fee \$288.90 (SISV/APFM member);	○ \$321.00 (Non Member)	
Category B	• Registration Fee \$144.45 (SISV/APFM member);	○ \$160.50 (Non Member)	

[□] No □ Yes (please give details on a separate sheet of paper)

FOR OFFICIAL USE

Accreditation Committee Recommendation	Assessment Panel Approved on (date)		
🗅 Cat A 🗳 Cat B 🗖 Reject	Accreditation Period Till (date)		
Date	MemNo		
Re-accreditated from	.to		