## PRIVATE SECURITY INDUSTRY ACT (CHAPTER 250A) PRIVATE SECURITY INDUSTRY (PRIVATE INVESTIGATION AND SECURITY AGENCIES) REGULATIONS

Submission of personal particulars by person seeking approval to be licensed: (Tick  $\sqrt{\ }$  in the appropriate box)

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□ AS A PRIVATE INVESTIGATOR □ AS A SECURITY OFFICER  Notes:  1. Printed and signed copy of this form must be completed and submitted to the licensing officer, i.e. the Licensin Officer, Police Licensing & Regulatory Department, Police Cantonment Complex, 391 New Bridge Road, Block D, #02701 Singapore 088762. Fax: 65573485.  2. One copy of a recent photograph of a size and form suitable for passports of the person submitting his particular must accompany this form.				
			ame (in BLOCK CAPITALS, underline Surname):	
			liases, if any:	
			ddress:	
ocal Address:				
ontact No:				
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ate of Birth:				
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itizenship:				
ex:				
RIC No. (with official ref.):				
assport No:				
THER INFORMATION (Tick √ in the appropriate box)  Have you suffered, or are suffering from any mental condition or illness?   □ Yes □ No				
Have you suffered, or are suffering from any medical condition, illness, disease or physical impair (eg Loss of sight, limb, hearing)? $\Box$ Yes $\Box$ No	men			
Are you currently in possession of a security officer or private investigator licence under another FIN IC number? $\Box$ Yes $\Box$ No				
Have you been charged with any offence in a court of law in any country for which the outcome i known yet (including traffic offences)? $\Box$ Yes $\Box$ No	s not			

## **DECLARATION**

I affirm that all the above facts in this application form are true and accurate to have not deliberately omitted any relevant fact. In submitting this application being made with the relevant authorities (including the Institute of Mentruthfulness of the above facts. I understand that should any of the above informinaccurate, I will be subject to appropriate action including criminal prosecutivil action.	on form, I consent to checks tal Health) to ascertain the nation turn out to be false and
Date	Signature of Applicant