

FORM A - ENDORSEMENT BY MAIN-CONTRACTOR / PROJECT OWNER

This form is to be completed by the main contractor or project owner. Please complete this form together with either one of the following supporting documents: **Letter of Award or Purchase/Work Order**. For submission of Invoices must be accompanied with payment proof. If your client is related to your company, please include a third-party (consultant or auditor) involved in the project to assess.

PLEASE NOTE THAT PROVIDING INACCURATE DETAILS AND FALSIFYING SIGNATURE/INFORMATION IS CONSIDERED A CRIMINAL ACT.

To : SCAL Administrative & Rating Committee

I, _____ (Name of Person Making Declaration) in the capacity of

☐ GM ☐ Sole Proprietor ☐ Director ☐ Partner ☐ Other: _____

hereby declare that _____ has been awarded a

(Name of Applicant)

contract for _____ /

(Type of Work / Job Scope)

(workhead)

of value S\$ _____

(excluding GST).

I hereby declare that the particulars given are true and correct.

1) Can you cite the reason why the contractor is selected for your project?

Answer: _____

2) Performance

Note: Please mark according to		1 Very Good	2 Good	3 Average	4 Below Average	5 Poor
a	Technical Capability	1	2	3	4	5
b	Quality of Work	1	2	3	4	5
c	Environmental Sustainability	1	2	3	4	5
d	Occupational Safety & Health -Safe Work practices -Safety Education for Workers -Provide Personal Protective Equipment to workers	1	2	3	4	5
e	Others:	1	2	3	4	5

I further declare that the performance assessment given by me is fair and without prejudice.

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3) Main-Contract *(Please tick accordingly)*

☐ On-Going

☐ Completed

Site / Location

☐ Private

☐ Public

☐ HDB

☐ JTC

☐ LTA

☐ MOE

☐ MOH

☐ PUB

☐ Others

4) Duration

Date of Commencement:

____/____/____
(dd/mm/yyyy)

Scheduled Date of Completion

____/____/____
(dd/mm/yyyy)

(For On-Going Project)

Actual Date of Completion

____/____/____
(dd/mm/yyyy)

(For Completed Project)

I further declare that all the particulars, assessment and project information including value and duration given in this form are correct as stated.

Signature of Person Making Declaration & Date

Company Stamp

Name: _____

Contact No: _____

Email: _____