



SISV MEMBER FIRM

ADMISSION CRITERIA

1. SISV welcomes firms providing primarily professional land surveying, quantity surveying and real estate related services to register as SISV Member Firm.
2. The **Entry Requirements** are as follows:-
 - 2.1 The Firm should be wholly owned by Fellow(FSISV) or Member(MSISV).
 - 2.2 If Fellow's or Member's share holding is less than 100% but more than 50%, the Firm may be admitted if the Council is satisfied that other shareholders hold similar and relevant professional qualification.
 - 2.3 If Fellow's or Member's Share holding is 50% or less, or their shareholders do not hold similar and relevant professional qualification, the firm may only be admitted if the Council is satisfied that the following criteria are met:
 - a) The Firm is managed by Fellow and/or Member of the Institute; and
 - b) The Firm has a good track record.
 - 2.4 For firms applying to be a Member Firm of the Land Surveying Division. They must also satisfy the requirements of the relevant Acts governing the Profession.
3. All Member Firms must follow the general procedure and guideline of the respective Profession in the course of conducting business. Member firms are subject to disciplinary action similar to those laid down in the Constitution for Fellow and Member of the Institute.
4. Membership in the SISV Member Firm is subjected to annual review. In addition, **Member Firm must notify the Institute within thirty (30) days of any change in shareholding, directorship or partnership or any change in management.**
5. The yearly membership fee is subject to review at the discretion of the Council. The fee is at \$200 per annum (excluding GST).

APPLICATION FOR SISV MEMBER FIRM

Completed form should be returned together with the relevant documents to:

Singapore Institute of Surveyors and Valuers
 20 Maxwell Road #10-09B Maxwell House, Singapore 069113
 Tel: 62223030 Fax: 62252453 Website: www.sisv.org.sg

Apply for Member Firm listing under *(please tick one only)*

- Land Surveying
- Quantity Surveying
- Valuation & General Practice

Area (please tick ONE area only): Valuation Property Management Agency & Marketing

(I) Particulars of Company

Name of Company:	
Registered Business Address:	
Postal Code:	
Tel (Main):	Facsimile:
Email:	
Tel (DID):	Contact Person:

(II) Ownership of Company (attach copy of company business profile)

- wholly owned by FSISV and/or MSISV
- more than 50% owned by FSISV and/or MSISV
- **50% or less owned by FSISV and/or MSISV [Note : ** refer to item (1) overleaf]

(III) Name of Shareholders, Professional Qualifications & Percentage of Share Holding

(Please use a separate sheet if space provided is insufficient, using the same format)

Name of Shareholders	Professional Qualification	Shareholding <small>(Total= 100%)</small>

To complete this section if the Ownership of Company is 50% or less owned by FSISV and/or MSISV

Name of Managing Director/Head of Department

Name	Membership Class	Position Held / Department

(Delete where applicable)*



1. ****As "The Company" is owned 50% or less** by FSISV and/or MSISV or other shareholders who do not hold similar and relevant professional qualification, I / We* enclose herewith the track record and management structure of "The Company" for your review.
 2. I / We* confirm on behalf of "The Company" that "The Company" shall follow the general procedure and guideline of the respective profession in the course of conducting business and that "The Company" shall be subject to disciplinary action similar to those laid down in the Constitution for Fellow and Member of the Institute.
 3. I / We* agree on behalf of "The Company" that membership is subject to Council's review. We will notify the Institute within thirty (30) days of any changes in shareholding, directorship or partnership or any change in Management.
 4. I / We* agree on behalf of "The Company" to pay a yearly membership fee the amount of which shall be decided by the Council.
 5. I / We* confirm that all information submitted herewith in support of my / our* application are true and correct to the best of my / our knowledge.
 6. I / We* understand that our application is subject to review and approve by the Council whose decision shall be final and conclusive.
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Authorised Signature

Name of Authorised Signatory

Company Stamp

Date

(* Delete where applicable)

July 2006