



Commissioner  
Singapore Civil Defence Force  
HQ Singapore Civil Defence Force  
91 Ubi Avenue 4  
Singapore 408827

**APPLICATION FOR  
WAIVER OF FIRE AND RESCUE  
MANAGEMENT REQUIREMENTS  
S 59 OF FIRE SAFETY ACT 1993**

**EXPLANATORY NOTES**

- All forms are to be fully and correctly completed upon submission, failing which the submission shall be rejected.
- Where submission of plan is done by a Competent Person, it is advisable to have this application form completed and submitted by the Competent Person as the applicant.
- In column (C) of Section II, the applicant should state clearly with regard to the modification / waiver sought, why he considers the endorsement of the provisions of the requirements unreasonable relative to the circumstances of the case.
- Details of owner/ operator/permit holder shall be provided if cc copy is required.
- Check the appropriate box (☒)
- \* Delete where applicable
- Information is not required if there is no change to the previous particulars provided to SCDF.
- It may take you 4 minutes to complete this form.

**PAYMENT NOTES**

- Kindly make payment within **4 weeks** from the date of acknowledgement letter; otherwise your application shall be rejected by the system. Application shall be processed only after full payment has been received.
- \$175/- shall be payable per specific requirement per proposal. Repeated waiver applications under the same proposal submitted at different period shall be charged separately.
- Payment can be made by applicant or Competent Person separately through NETS, Cashcard, Credit Card.

**SECTION 1 (To be completed by applicant)**

**A. Particulars Of Ride**

Proposal :

*Lot/Plot No.		House No.	
*TS/MK No.		Street Name :	
SCDF BP or ME Plans Ref. No.			Postal Code
Previous Waiver Case Ref. No(s) (If any)		Consultation Ref. No(s) (If any)	

**B. Particulars Of Applicant For The Waiver**

Applicant Name		Tel. No.		# Fax No	
Company Name					
# Company Address:					# Postal Code

**C. Particulars Of Competent Person (CP) If Waiver Applicant Is Not The CP**

CP Name		Tel. No.		# Fax No	
CP Company Name					
# CP Company Address:					# Postal Code

<b>D. Waiver Fee Computation</b>			
Total No. of Waiver Item		Total Fee Payable : _____ items x \$175/- = \$ _____	
<b>E. Modes of Payment</b>			
<input type="checkbox"/> Credit Card	Credit card payment can be made over the customer service counter at HQ SCDF		
<input type="checkbox"/> *CashCard/NETS	Please note that payment is to be made over the customer service counter at HQ SCDF		
_____		_____	
<b>Waiver Applicant Company's Stamp</b>		<b>Signature</b>	<b>Date</b>
<b>SECTION 2 (For Official Use Only)</b>			
Waiver Case Reference No.	_____		
Waiver meeting date	_____		
Name of PO	_____		
<b>Fee Verification</b>			
Waiver fee computed	_____	Name of VO	_____
Waiver fee collected	_____	_____ Signature <span style="float: right;">_____</span> Date	
Amount short for	_____		
Date applicant notified	_____		
Date Short for recovered	_____		

<b>SECTION II</b> a. To be completed by <u>applicant</u> except parts D & F b. To use a <u>fresh form</u> for each <u>waiver item</u> c. To <u>delete</u> where <u>appropriate</u> **			SCDF Case Reference No : _____  Waiver item s/no: _____
<b>A. Description of waiver application &amp; relevant clause number</b>  <i>Eg. To <b>permit</b> provision of one hardstanding only – located along Scotts Road.</i>	<b>B. Provisions made on plan</b>	<b>C. Reasons in support of application</b>	<b>D. Waiver Decision</b> <i>(For official use only)*</i>  The waiver application is <b>Granted / Not granted / Granted with Conditions / Pending**</b>  <b>Conditions (if any):</b> _____ _____  <b>Reasons for decision:</b> _____ _____  <b>Time-frame (if any):</b> _____  _____ Waiver Meeting Recorder's name & signature Date
<b>To permit / waive / exempt / omit **</b>          State <b>clause number</b> in Code of Practice for Fire Precautions which is relevant to the application:  Clause _____			
<b>E. Applicant's name &amp; signature</b>   _____ Name & Signature	<b>F. Processing Officer's name &amp; signature (For official use only)*</b>   _____ <b>Name &amp; Signature</b>		
	_____ <b>Date</b>		