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**No. S 668**

ARCHITECTS ACT  
(CHAPTER 12)

ARCHITECTS (AMENDMENT)  
RULES 2012

In exercise of the powers conferred by section 38 of the Architects Act, the Board of Architects, with the approval of the Minister for National Development, hereby makes the following Rules:

**Citation and commencement**

1. These Rules may be cited as the Architects (Amendment) Rules 2012 and shall come into operation on 1st January 2013.

**Amendment of First Schedule**

2. The First Schedule to the Architects Rules (R 1) is amended —  
(a) by deleting Form 1 and substituting the following Form:

## “FORM 1

Rule 2

ARCHITECTS ACT  
(CHAPTER 12)  
ARCHITECTS RULES  
APPLICATION FOR REGISTRATION

To: The Registrar  
Board of Architects  
5 Maxwell Road  
1st Storey Tower Block  
Singapore 069110

Paste a recent  
passport size  
photograph of  
applicant

I hereby apply for my name to be entered in the Register of Architects and submit the following particulars in support of my application:

## A PERSONAL PARTICULARS

(To be completed by Applicant in Block Letters)

Full Name:

\*Mr/Mrs/Ms/Madam/Dr/Prof :

(Underline Surname)

Home Address :

Telephone Number :

(Home) (HP)

Email Address :

\*NRIC/Passport No. : Nationality :

Date of Birth : Place of Birth :

Sex : Male ☐ Female ☐

Race : Chinese ☐ Indian ☐ Malay ☐ Others \_\_\_\_\_ ☐  
(Please specify)

Marital Status : Single ☐ Married ☐

Residential Status : Not applicable ☐ Permanent Resident ☐ Professional Visit Pass ☐

Mailing Address : Home ☐ Office ☐

\* Delete whichever is not applicable.

☐

Tick appropriate boxes

**B OFFICE PARTICULARS**

Office Name :

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Office Address :

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Office Telephone : 

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 Office Fax : 

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**C PRACTICAL EXPERIENCE**

I seek registration by reason of having the practical experience referred to in section 15(2)\*(a)/(b)/(c) of the Architects Act (Cap. 12).

My practical experience in architectural work has been as follows:

(Give full particulars, including the names of employers, positions held and dates when employed by each employer)

**D ARCHITECTURAL QUALIFICATIONS**

Year	Qualification
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(Please attach a copy of the above qualification and bring along the original certificate)

Full name and address of the university, college or educational institution which conferred the above degree, diploma or other architectural qualification.

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\*Delete whichever is not applicable.

## E CHARACTER REFERENCE

For evidence that I am of good character and reputation, reference may be made to the following persons, not being my immediate relations:

i) Name :	<hr/>		
Address :	<hr/>		
	<hr/>		
Occupation or Profession :	<hr/>	Period of acquaintance :	<hr/>
ii) Name :	<hr/>		
Address :	<hr/>		
	<hr/>		
Occupation or Profession :	<hr/>	Period of acquaintance :	<hr/>

F I attach my \*cash/cheque/bank draft for S\$350/- made payable to the "Board of Architects" being payment of:

+(a) the registration fee	S\$200.00
(b) the fee for the certificate of registration	<u>S\$150.00</u>
	S\$350.00
	=====

+The registration fee shall not be refundable if the application is unsuccessful.

\*Delete whichever is not applicable.

## G DECLARATION

I, the undersigned, hereby declare that all the foregoing statements are true in every respect.

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Signature of Applicant

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Date

Note : Applicant is reminded that it is an offence to make any false or fraudulent representation or declaration, either verbally or in writing in connection with this application.

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**RESULT OF THE APPLICATION**

This space is not to be filled by the applicant.

The application was considered at a meeting of the Board of Architects held at the office of \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ of the year \_\_\_\_\_ at which meeting the following members were present:

President : \_\_\_\_\_

Members : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Registrar : \_\_\_\_\_

The application was Approved/Disapproved/Deferred.

Endorsed by :

President : \_\_\_\_\_

Registrar : \_\_\_\_\_

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**FOR OFFICIAL USE ONLY**

Date received : \_\_\_\_\_

Registration fee received : \_\_\_\_\_

Receipt No. : \_\_\_\_\_

Sent on : \_\_\_\_\_

Registration No. : \_\_\_\_\_

Entered in Register : \_\_\_\_\_

”  
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