

## REGISTRATION AS AN LPGAS PRACTITIONER

Section A: Particulars of Applicant	
<b>1. Name</b> :	f Birth:
2. Identity Card Number:	
3. Insert passport size photo	
4. Residential address	
5. Telephone Number:E-ma	ail Address:
6. Current Employer:	
(a) Company Name:	
(b) Nature of business	
(c) Physical address	
(d) Telephone/Cell phone number	

## Section B: Qualifications & Experience of Applicant

(1) R	elevant qualifications and t	raining, including apprent	iceship			
(a) A	Academic Qualification (state only the highest qualification attained) –					
• • • • • • •			attach copy			
(b) Apprenticeship schemes or Vocational Training completed* –						
attach proof						
(c) Fo	ormal LPG Training Received	(attach proof)				
#	Name of Institute/Body	Name of Course/Module	Duration			
1						
2						
3						

## (2) Practical Experience in Gas Installation Work:

#	Date of Installation	No of Cylinders/ total LPG Capacity	Name of Client, Address & Contact phone number
1			
2			
3			
4			
5			

Section C: Classes of Gas installation work being applied for; ( $Tick\ applicable\ class$ )
Domestic
Commercial
Industrial
Other (Specify)
Section D: Declaration
I (full names) hereby declare that all information provided
herein is within my personal knowledge and that -
(a) I am duly authorized to make this declaration;
(b) I am the person responsible for this registration and any conditions attached thereto;
(c) I have read and understood the regulations related hereto, with specific
reference regarding to any false declaration; and
(d) I understand the consequences of making a false declaration.
SignedDate