

Technology Development Division
Quality and Certification Department

CONQUAS Line: 6730 4400

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**CONQUAS
ARCHITECTURAL WORKS**

Waiver for Internal Wet Area Waterproofing In-Process Inspection

PROJECT NAME / ID NO: _____

MAIN CONTRACTOR: _____

WATERPROOFING SPECIALIST CONTRACTOR: _____

1. **Waterproofing works for all Internal Wet Area including Roofs are carried out by the above mentioned Waterproofing Specialist contractor**
2. **The Actual Commencement / Completion Date of the all Internal Wet Area Waterproofing works including Roofs for the project are as follows:**

Commencement Date _____ Day _____ MTH _____ YR

Completion Date _____ Day _____ MTH _____ YR

Full points will be awarded upon submission of accreditation confirmation. The commencement and completion date of waterproofing works for the project must be within the validity of SCI accreditation period.

I hereby certify that the above declarations are correct.

Name of Project Qualified Person

Signature/Date/QP's Stamp

Company / Agency Name/ Contact no _____

Compulsory Supporting Documents to be submitted with FORM C

- **Copy of Letter Of Award (LOA) between Main Contractor and waterproofing specialist contractor**
- **Updated copy of your waterproofing specialist's SCI Accreditation Certificate covering the period of project's waterproofing works**