Note:

For certification of your collective agreement, you are required to fill up the questionnaire below and submit it when filing your collective agreement to this Court. This information sought is for official use.

Answer every question. Insert "Nil" or "Not Applicable" where appropriate. Please ensure that you submit this questionnaire promptly and not later than 1 week of filing of the collective agreement. You may submit it by post or fax (fax no. 63324215).

Do contact our staff Ms Rasidah / Mrs Lim at tel. No. 63324220 should you need any assistance.

		COLLECTIVE AGREEMEN		
		<u>SMOU (</u>	<u>CA</u>	
Title	of Co	llective Agreement (CA):		
1.	a)	Total number of bargainable employ	yees covered by CA	
	b)	Number of union members		
2.	Date of incorporation (registration) of the Company/Companies in Singapore			
3.	Nature of business:			
4.	The CA covers			
5.	Тур	e of Employees	Maritime Officers	
6.	Average percentage of annual increment (if any) for period covered by Period Covered by CA			this CA - <u>Average</u>
	Year	r 1		na
	Year	r 2		na
I hei		eclare that the information given abov	re is, to the best of my kno	wledge, true and
Signature, designation and Company stamp			date	
Parti	iculars	of contact person for clarification –		
	Nam	ne:		
	Desi	ignation		
	Tel l	No	Fax:	