

GREEN MARK 'HEALTH CHECK' INCENTIVE SCHEME FOR EXISTING BUILDINGS

APPLICATION FORM (Private Development)

1. Applicants should read the guidelines which are deemed to be incorporated by reference before filling in this form.
2. You will need about 10 minutes to fill this form. All fields in this application are compulsory. Where information is not applicable, a "N.A." is necessary.
3. All necessary supporting documents must be submitted together with your application.
4. Where terms or phrases are not defined herein, applicants should refer to the website of the Building and Construction Authority ("BCA") or write to BCA for interpretive guidance. Such interpretive guidance shall be conclusive.

This application form is to be submitted, together with Green Mark application form and the Project information sheets duly completed and all required documents listed in the checklist to:

**Deputy Director
Green Building Policy Department
Green Mark Health Check (GMIS-EB) Scheme
c/o: 5 Maxwell Road, #17-00 Tower Block MND Complex
Building and Construction Authority
Singapore 069110**

For Official Use Only:

Registration No.
Incentive Entitlement

**GREEN MARK 'HEALTH CHECK' INCENTIVE SCHEME FOR
EXISTING BUILDINGS (APPLICATION FORM)**

PARTICULARS & DECLARATION BY APPLICANTS

- 1) We declare that the facts stated in this application and the accompanying information are true and correct to the best of our knowledge and that we have not withheld any material fact.

- 2) We declare that no 'Health Check' has commenced at the time of application. We declare that we have not received similar incentives for similar type of work from any other government agencies over the last 1 year.

Building Owner:			
Contact Person: (Name / Designation)		Company Stamp:	
Contact Person: (Email Address)			
Contact Person: (Tel/Mobile No.)			
Building Owner: (Signature)		Date:	

**GREEN MARK 'HEALTH CHECK' INCENTIVE SCHEME FOR
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PROJECT INFORMATION (Sheet 1)**

BUILDING DETAILS

Name of Building:	
Building Category:	<input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Others: _____
Address:	
Building Owner:	
Managing Agent / Facilities Manager:	
ESCO, M&E Professional Engineer or BCA Term Contractor:	<input type="checkbox"/> We would like to engage BCA's Term Contractor to determine our air-conditioning plant efficiency
	<input type="checkbox"/> We will be engaging our own accredited ESCO / M&E Professional Engineer to determine our central air-conditioning plant efficiency Name of Company: Address: Contact Person (Name/Designation): Contact Details (HP/Email):

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PROJECT INFORMATION (Sheet 2)

CHILLER PLANT DETAILS (Please list chillers that are in operation only, including those by rotation basis. Do not list chillers that are not in operation at all.)

Items	Capacity (RT)	Age of chiller	Brand	Refrigerant
Chiller 1				
Chiller 2				
Chiller 3				
Chiller 4				
Chiller 5				
Chiller 6				
Chiller 7				

Number of chillers in operation? (Refers to the number of chillers that needs to operate).	Weekday		Saturday		Sunday		Public Holiday	
	Peak	Off-Peak	Peak	Off-Peak	Peak	Off-Peak	Peak	Off-Peak
Total number of chillers that operate in an entire day								

CHECKLIST OF DOCUMENTS TO BE ENCLOSED WITH APPLICATION

For all applications:

- a) Documentary evidence of building ownership

For applicants engaging their own ESCO / M&E Professional Engineer:

- b) a copy of contract / purchase order and / or such other document(s) setting out the contractual relationship with the ESCO or M&E Professional Engineer and the costs which will be charged by the ESCO or M&E Professional Engineer
- c) personal and professional details and curriculum vitae of ESCO & M&E Professional Engineer who will be carrying out the 'Health Check'
- d) a schedule stating when the 'Health Check' will be carried out