

APPLICATION FORM FOR SECURITY SERVICE PROVIDER (SSP) LICENCE RENEWAL

To: The Licensing Officer, Security Industry Division, Police Licensing & Regulatory Department

I _____ (Name/NRIC), Director /

Sole Proprietor / Partner of _____ (Agency Name)

wish to renew the licence to operate as a Security Service Provider. I also confirm that my agency's operating address are as follows:

My company provides the following: (Please 'tick' where applicable)

- Technical Surveillance Counter Measure Services
- Technical Surveillance Counter Measure Equipment
- Central Alarm Monitoring Services (CAMS) operator services
- Sales, import or export of any Night Vision Equipment

Only for SSP licence with Central Alarm Monitoring Services (CAMS) operator services

- A latest copy of my agency's Active Staff Listing (licensed security officers) printed on _____ (Date).
- A latest copy of the report SS558:2010 which was submitted to Police Radio Division on _____ (Date).

Name of Director/ Partner /Sole Proprietor: _____

Home address: _____

NRIC: _____ Home (tel): _____ HP: _____

Office (tel): _____ Fax: _____ Email: _____

Signature of main contact person: _____

Date: _____

*CAMS Operator refers to anyone who provides the service of monitoring intruder alarm systems linked to a central monitoring station.

*Alarm system means an intruder alarm system, either a device or series of devices including hardwired systems and systems interconnected with a radio frequency method such as cellular or private radio signals, which emits or transmits a remote or local audible, visual or electronic signal indicating an alarm condition, but does not include an alarm installed in a vehicle or an alarm attached to the body of an individual.