12/F, Bright Growth Medical Centre, 335 Nathan Road, Kowloon Tel: 2786 9009 Fax: 2786 1767 E-mail: info@sasa.org.hk website: www.sasa.org.hk

${\bf SMART-SAFETY\,Management\,Audit\,Rating\,Tool}\\ {\bf REQUISITION\,FORM}$

Please tick as appropriate:							
☐ Full Member ☐ Associate Member ☐ Company Member ☐ Non-Member							
Name of Company: (f	or Comp	any Mem	ber on	ly)			
Name of Member:							
Contact person:				Position:			
Office Tel:				Mobile Tel:			
Fax:				E-Mail			
Description of audit Premises/ Project Nan			_	hic locations/Na	me of	Average l	Employees
1							
2							
3							
4							
5							
The Fee Schedule for SMART							
Type of Membership	Non-m	ember	Con	npany Member	Memb	oer	Quantity
Company License (Only ONE audit location)	* *			Free	N/A		
Additional Location		\$1000		\$200	\$300		
Individual License (Only ONE audit location)	Ψ			N/A		\$300	
Revision (updated version) (Only for existing location)		\$500		Free	Free		
Total Cost:			HK \$				
Module Required incl	Constru	Construction Industry with 14 elements					
(Please select your Mo	Containe	Container Terminals with 14 elements					
Shipyards with 14 elements						SHP 4.0	
Factories with 14 elements						FAT 4.0	

For Office Use:

Date Received:

Amount Received:

Bank:

Cheque No.:

Handle by: