



Singapore Customs,
55 Newton Road #07-02,
Revenue House
Singapore 307987
Tel No. : 6775 5137
Fax No. : 6775 5946
Email: customs_nacwc@customs.gov.sg

NOTIFICATION ON TRANSFER OF SCHEDULE 1 CHEMICAL(S) (T-1A)

This set of forms may take you 10 minutes to fill in. You will need the following information to fill in the forms:

- Details of Schedule 1 Chemical
- Details of Supplying Company
- Details of Receiving Company

T-1A TO BE SUBMITTED PRIOR TO EACH TRANSFER

SECTION A DETAILS OF SCHEDULE 1 CHEMICAL

(1) IUPAC Chemical Name:	(2) CAS Registry No:	(3) Percentage Purity (%):
(4) Please indicate Type of Transfer: (a) <input type="checkbox"/> Import (b) <input type="checkbox"/> Export (c) <input type="checkbox"/> Local Transfer	(5) Quantity Involved:	(6) Planned Date of Transfer (dd/mm/yyyy):
(7) Purpose of Transfer: (a) <input type="checkbox"/> Research (b) <input type="checkbox"/> Protective (c) <input type="checkbox"/> Waste Disposal (d) <input type="checkbox"/> Medical (e) <input type="checkbox"/> Pharmaceutical (f) <input type="checkbox"/> Production of Schedule 1 Chemical		

SECTION B DETAILS OF SUPPLYING COMPANY

SECTION C DETAILS OF RECEIVING COMPANY

(8) Country:	(14) Country:		
(9) Name of Company:	(15) Name of Company:		
(10) Company Street Address:	(16) Company Street Address:		
(11) Contact Person:	(17) Contact Person:		
(12) Tel No:	(13) Fax No:	(18) Tel No:	(19) Fax No:

SECTION D DETAILS OF DECLARANT

(20) Company Name:	(21) Company Address:	
(22) Name of Declarant:	(23) NRIC / Passport No.:	
(24) Designation:	(25) Tel No:	(26) Fax No:

SECTION E DECLARATION

I, _____ of _____ declare that all the information given above
(Name of Declarant) (NRIC/Passport No.)
are true and correct.

Signature/Date

Company/ Organisation Stamp

SECTION F FOR OFFICIAL USE

Date Received (dd/mm/yyyy): _____ Reference Number: _____



Singapore Customs,
55 Newton Road #07-02,
Revenue House
Singapore 307987
Tel No. : 6775 5137
Fax No. : 6775 5946
Email: customs_nacwc@customs.gov.sg

NOTIFICATION ON TRANSFER OF SCHEDULE 1 CHEMICAL(S) (T-1B)

This set of forms may take you 10 minutes to fill in. You will need the following information to fill in the forms:

- Details of Schedule 1 Chemical
- Details of Supplying Company
- Details of Receiving Company

T-1B TO BE SUBMITTED AFTER EACH TRANSFER

Reference Number issued for T-1A Form:

SECTION A DETAILS OF SCHEDULE 1 CHEMICAL

(1) IUPAC Chemical Name:	(2) CAS Registry No:	(3) Percentage Purity (%):
(4) Please indicate Type of Transfer: (a) <input type="checkbox"/> Import (b) <input type="checkbox"/> Export (c) <input type="checkbox"/> Local Transfer	(5) Quantity Involved:	(6) <u>Actual</u> Date of Transfer (dd/mm/yyyy):
(7) Purpose of Transfer: (a) <input type="checkbox"/> Research (b) <input type="checkbox"/> Protective (c) <input type="checkbox"/> Waste Disposal (d) <input type="checkbox"/> Medical (e) <input type="checkbox"/> Pharmaceutical (f) <input type="checkbox"/> Production of Schedule 1 Chemical		

SECTION B DETAILS OF SUPPLYING COMPANY

SECTION C: DETAILS OF RECEIVING COMPANY

(8) Country:	(11) Country:
(9) Name of Company:	(12) Name of Company:
(10) Company Street Address:	(13) Company Street Address:

SECTION D DETAILS OF DECLARANT

(14) Company Name:	(15) Company Address:	
(16) Name of Declarant:	(17) NRIC / Passport No.:	
(18) Designation:	(19) Tel No:	(20) Fax No:

SECTION E DECLARATION

I, _____ of _____ declare that all the information given above
(Name of Declarant) (NRIC/Passport No.)
are true and correct.

Signature/Date

Company/ Organisation Stamp