



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

## NA(CWC) LICENCE APPLICATION FORM A.1: FOR ACTIVITIES INVOLVING SCHEDULE 1 CHEMICAL

### GENERAL INSTRUCTIONS

- ◆ All relevant forms for this application must be submitted together with the NA(CWC) Licence Application Cover Form.
- ◆ All sections must be completed. Where not applicable, please specify "N.A.". Any incomplete or illegible application will not be accepted.
- ◆ All forms must be duly endorsed with the signature of one of the licence applicants and date.
- ◆ A chemical at different concentration / purity should be submitted on separate forms.
- ◆ Please duplicate the form as required.
- ◆ This form may take you 20 minutes to fill in. You will need the following information to fill in the form:
  - Details of the Schedule 1 Chemical
  - Details of Product containing the Schedule 1 Chemical
  - MSDS or other necessary documents for the Schedule 1 Chemical

| FORMS    | PURPOSE   |
|----------|---|
| Form A.1 | For Company / Organization engaging in activities involving Schedule 1 Chemical |

**FORM A.1: DETAILS OF SCHEDULE 1 CHEMICAL AND PRODUCT CONTAINING SCHEDULE 1 CHEMICAL**

| Details of Schedule 1 Chemical  | Details of Product containing Schedule 1 Chemical |
|---|---|
| (1) Name of Chemical:   | (2) Common Trade Name:                            |
| (3) CAS Registry No.:   | (4) Percentage Purity (%):                        |
| (5) Chemical Structure:   |   |
| (6) Has the MSDS and other necessary documents of this chemical been submitted with this application?<br><input type="checkbox"/> Yes, the MSDS and other necessary documents are submitted.<br>Please specify any other documents that are submitted: _____<br><br><input type="checkbox"/> No, reference to previous submission is provided.<br>Reference to previous submission must be within the past 3 years.<br>Please specify the year of submission: _____ |   |
| (7) Applicant's Signature:  | (8) Date (dd/mm/yyyy)                             |

Please duplicate form as required.

**FORM A.1: ACTIVITIES INVOLVING SCHEDULE 1 CHEMICAL**

(9) Please indicate the required activities for this application and provide the details accordingly:

|   |  |
|---|--|
| <input type="checkbox"/> <b>Production</b>  |  |
| Anticipated Quantity:<br><br>μg             | Specific purpose of production, indicating any final products formed:  |
|   | Briefly describe the reaction procedure, indicating the type of reaction taking place or principle employed for the procedure:                                     |
| <input type="checkbox"/> <b>Processing</b>  |  |
| Anticipated Quantity:<br><br>μg             | Specific purpose of processing, indicating any final products formed and its purity:   |
|   | Briefly describe the procedure and the principle employed for the procedure:   |
| <input type="checkbox"/> <b>Consumption</b> |  |
| Anticipated Quantity:<br><br>μg             | Specific purpose of consumption, indicating any final products formed:   |
|   | Briefly describe the reaction procedure, indicating the type of reaction taking place or principle employed for the procedure:                                     |
| <input type="checkbox"/> <b>Storage</b>     |  |
| Anticipated Quantity:<br><br>μg             | Specific eventual purpose of this chemical, indicating how would it be used:   |
|   | Is this chemical from a previous stock?<br><input type="checkbox"/> No <input type="checkbox"/> Yes<br>Please specify the year that this stock was acquired: _____ |

Please duplicate form as required.

