



To : The Council
The Law Society of Singapore
#01-03
Maxwell Chambers Suites
28 Maxwell Road
Singapore 069120

BK FORM 1

Year of Application: 20 _____

**APPLICATION FOR APPROVAL OF A BOOK-KEEPER
TO BE ENGAGED BY A LAW PRACTICE**
(Where Proposed Book-Keeper is an Individual/Sole Proprietor)

A. Law Practice's Particulars

Name of Proprietor/Managing Partner/Director: _____

Admission No: _____

Name of Law Practice: _____

Address of Law Practice: _____

Tel: _____ DID: _____ E-mail: _____

Contact Person: _____ Designation: _____

B. Book-Keeper's Particulars

Name of Book-Keeper: _____

Name of Book-Keeping Business: _____

NRIC No: _____ Registration No (UEN): _____

Tel: _____ Fax: _____ E-mail: _____

Residential Address: _____

C. Particulars of Professional Qualifications/Experience of Book-Keeper to be Engaged

Book-Keeper's Professional Qualifications: _____

Years of Book-Keeping Experience in a Law Practice: _____

Name(s) of Law Practice and Period(s) of Engagement:

<u>Name of Law Practice</u>	<u>Period (in chronological order)</u>

Note:

- 1. Please attach the requisite original Statutory Declaration ('SD 1') of the book-keeper to this application.**
- 2. Application will only be processed upon receipt of the original Statutory Declaration.**

For Official Use Only

Name of Officer Processing Application: _____

Date of Receipt of Application: _____

Remarks: _____