

**FORM C - Retrofitting Declaration Form for Non-residential Building**

To: **Building and Construction Authority**  
**5 Maxwell Road #07-00**  
**Tower Block MND Complex**  
**Singapore 069110**

Fax: 6325 4437 (BCA)  
 Email: bca\_windows@bca.gov.sg

Dear Sir

**RETROFITTING OF CASEMENT WINDOWS AT**

**Address of building / unit \*** \_\_\_\_\_  
 \_\_\_\_\_

**Postal Code** \_\_\_\_\_

<b>DETAILS OF APPROVED WINDOW CONTRACTOR</b>		
<b>Name &amp; Address of Approved Window Contractor:</b>	<b>Office Tel</b>	
	<b>Facsimile</b>	
<b>Company Stamp:</b>	<b>ACRA Registration No</b>	
<b>Name of Trained Window Installer:</b>	<b>NRIC/FIN No</b>	
	<b>Certificate No</b>	
I have been engaged and instructed to <b>inspect and retrofit all the casement windows</b> in the above-mentioned building / unit * and certify that <b>all the casement windows</b> variable geometry stays have been <b>retrofitted</b> with stainless steel rivets of type 304 complying with BS EN 10088 or its equivalent.		
_____ <b>Signature of Approved Window Contractor</b>		
_____ <b>Signature of Trained Window Installer</b>		_____ <b>Date of Completion of retrofitting work</b>

**Name of Building / Unit Owner \*:** \_\_\_\_\_

**ACRA / NRIC / FIN No \*:** \_\_\_\_\_

**Contact No:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Note: \* Please delete accordingly.