

Appendix 1

Real-name Authentication Form for Erection Contractor and Transport Contractor

(Please fill in the form in block letters)

Company Name:			
Company Address:			
Zip Code:		Tel(Including Area Code):	
Person in Charge of the Work:		His\Her Mobile Number (Their Unique Number)	
His/Her Identity Card No. (Second-generation Card, 18-digits)			
Email Address (The Unique Address)			
Person in Charge of the Site		His/her Mobile Number	
Person in Charge of Safety		His/her Mobile Number	
<p>Please transcribe in block letters the following text :</p> <p>I have fully understood the contents of the Safety Commitment. I am committed to strictly obeying the rules set out in the Safety Commitment. Should there be any quality, fire, or safety problems due to workers on behalf of whom I have applied for relevant permits and passes, I and my company shall bear all resulting economic and legal liabilities.</p> <p>_____</p> <p>_____</p> <p>_____</p>			
Company Seal:	Signature of Person in Charge of the Work:		
Date: ____ / ____ / ____ (DD/MM/YY)			

Return Receipt

Company Name:

Person in Charge of the Work:

Mobile:

(The following is to be filled in by SNIEC)

SNIEC Seal:

SNIEC Executive:

Date: ____ / ____ / ____ (DD/MM/YY)