**INDUSTRY CONSULTATION ON THE PROPOSED WSH (MAJOR HAZARD INSTALLATIONS) REGULATIONS**

(Feedback must be filed using this form and submitted to [mom\_oshd\_consultation@mom.gov.sg](mailto:mom_oshd_consultation@mom.gov.sg))

Electronic submission is preferred.

|  |  |
| --- | --- |
| **Date Submitted:** |  |
| **Name:** | (For organisation, please identify the company, institution or association and provide the name of a contact person)  Society of Loss Prevention, Singapore |
| **Contact Details:** | Tel :  Fax :  E-mail : |

|  |  |  |  |
| --- | --- | --- | --- |
| **Feedback:** | | | |
| **No.** | **Regulation No. / Heading** [Example:  Reg 3- Application ] | **Feedback e.g. comments / Rationale** | **Suggested phrasing** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |
| --- | --- |
| **Any Other Comments:** |  |