**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)

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:** |  |