

LETTER OF UNDERTAKING

PARTICULARS OF ORIGINAL APPLICANT		
Name (please underline surname) Dr / Mr / Mrs / Mdm / Ms	Identification / Passport No.	
Address	Tel:	(Home)
		(HP)
Email Address	I am the	of the Deceased
		(please state relationship)
PARTICULARS OF DECEASED		
Name	Niche	(Block)
		(Level)
Columbarium (please ✓)		(Room)
Choa Chu Kang Mandai		(No)
of the deceased will be kept, will not conduct any religious chanting or other rituals, place offerings or carry out any burning activities (eg. burning of joss stick/candles/incense) within the niche room. I shall adhere to the above conditions laid down by the Management of Choa Chu Kang Columbarium and Mandai Columbarium, for the purpose of storing the cremated remains in the said niche. I acknowledge and understand that the Agency reserve the right to repossess the niche should there be any breaches to any term and condition relating to the storage of ashes or rule and regulation as well as any rule and regulation pertaining to the columbarium that may be imposed from time to time. I have carried out due diligence to ensure that there is no objection from my family members and relatives with regard to this application. I conscientiously believe the statements made by me in this form are true in every particular to the best of my knowledge, belief and ability. I acknowledge and understand that should I be found to have knowingly provided false information, the Agency will investigate the matter and if warranted, initiate prosecution or take other action against me. The National Environment Agency (NEA) collects personal information to carry out its various functions and duties		
under the National Environment Agency Act 2002 including the implementation of environmental and public health policies in Singapore and any other related purposes. I hereby consent to NEA's use of the information provided by me in the course of any application I have made to the NEA, to facilitate the processing of such application for such purposes and for other purposes relating to specific services. I hereby further consent to NEA sharing the information in such application with other Government agencies, or non-government entities authorised to carry out specific government services, unless prohibited by legislation.		
Signature of Original Applicant		Date