



SELF-DECLARATION FORM

This declaration should only be used when the Declarant has exhausted all means of obtaining the necessary supporting documents. **This document must be signed in the presence of the Centre Manager/Staff.** The Declarant must produce his/her NRIC when making the declaration. The original declaration form is to be kept by the Office. This declaration is for Members' MEANS Testing.

I, (Name as in NRIC) _____ (NRIC No) _____

(Date of Birth) _____ am the (relationship to the Member) _____

of (Name of Member), _____ staying at (Residential Address) _____

(Contact No.) _____

Hereby declare that, (answer ALL questions - Indicate Yes or NA [not applicable] and fill in the blanks):

S/N	Applicable	Questions
1.		I am presently not employed and have had no income for the last _____ months.
2.		I have an average income / allowance * of S\$ _____ (rounded to the nearest dollar) per month from the specified source of income: (please circle) Part-time Employment / Rental / Pension / Retirement Fund / maintenance / family members / others: _____.
3.		I am legally separated/ divorced from _____. (Name, NRIC & Relationship with me).
4.		I and/ or my spouse own more than one property whether in Singapore or overseas, and have not sold any property for the past 3 years.
5.		My family is receiving a total amount of S\$ _____ subsidies per month for period of _____ months.
6.		Others (please specify): _____

Translation - I acknowledge I fully understand what was explained to me pertaining to the above content of this declaration.

I declare that the information provided by me is true and correct, and I furnish the information knowing that I may be liable to pay to Mamre Oaks Ltd for all loss, cost and expenses suffered by Mamre Oaks Ltd, if I have stated any information, which I know to be false or do not believe to be true. I will inform Mamre Oaks Ltd of any subsequent changes in the information stated here.

Signed by;

Full Name

Signature

Date

#Interpreted in _____
Translated language

by _____
Full Name and Signature

Date

This self-Declaration must be signed in the presence of MO Staff.

Name/ Designation/ Mamre Oaks Ltd

Signature

Date

Furnishing false information in this document for the purpose of obtaining a subsidy is a criminal offence, for which the offender may be fined and/or imprisoned.

Use 1 copy for each caregiver.

* Includes all sources of income except payouts from Eldersfield and IDAPE