

**To: The Director of Water Supplies  
47/F Immigration Tower  
7 Gloucester Road  
Wan Chai  
Hong Kong**

**Quality Water Recognition Scheme for Buildings**

*Please checking ONE of the boxes listed below*

**New Application<sup>1</sup> Form (Validity of Certificate<sup>2</sup> – 1 year)**

**Renewal Application Form (within 3 months before or after expiry, Validity of Certificate<sup>2</sup> – 2 year)**

I/We\* apply for acceptance to the Quality Water Recognition Scheme for Buildings (referred to as the “Scheme” below).

**A. Type of Building(s)**

*Please indicate the type of building(s) applying to join the Scheme by checking ONE of the boxes listed below:-*

Hotels Licence No.: \_\_\_\_\_

Restaurants Licence No.: \_\_\_\_\_

Buildings (residential) – Total No. of residential flats: \_\_\_\_\_

Buildings (commercial or combined commercial and residential) -  
Total No. of residential flats: \_\_\_\_\_

Others (please specify) \_\_\_\_\_

**B. Particulars of the Applicant**

English and Chinese Name of owner (If applicable, Incorporated Owners  
Registration Certificate No.: \_\_\_\_\_) / operator / management agent:

Correspondence address:  
\_\_\_\_\_

<sup>1</sup> Renewal application beyond 3 months after the expiry of the latest certificate will be treated as a new application;

<sup>2</sup> Starting from 1 January 2008, there are 3 grades of Certificates to awarded buildings according to the following criteria:

- Blue Certificates : New participation or continuous participation with less than 3 years (any lapse between 2 certificates for less than 3 months will be treated as continuous participation);
- Silver Certificates : Continuous participation with 3 years or more but less than 5 years; and
- Gold Certificates : Continuous participation with 5 years or more.

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Name of contact person: \_\_\_\_\_

Post / Title of contact person: \_\_\_\_\_

Contact tel. no. / fax no. : \_\_\_\_\_

Contact e-mail address: \_\_\_\_\_

I/We\* wish to receive future correspondence relating to the Scheme by e-mail / fax / mail\*

**C. Name(s), Age(s) and Address(es) of the Building(s)/Hotels/Restaurants to be included in the Application** *(please use additional blank sheets if necessary)*

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**D. Preferred Format on the Scheme Certificate(s)**

*Please indicate the preferred format of the scheme certificate(s) by checking **ONE** of the boxes listed below:-*

One certificate for each building/hotel/restaurant

One certificate for the whole estate/development/phase\* and this Application covers all blocks therein. The preferred naming is:

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**E. Documents to be Included in the Application**

The application shall be submitted together with the following documents for each building:

1. Completed Checklist on Tank Cleaning, Water Quality Examination and Plumbing Inspection (Annex I to Form A).
2. At least 3 immediately past Records of Cleaning Water Tanks (for example, copies of signed Completion Certificates or Confined Space – Permit-to-Work Certificates, which show the locations and dates of cleaning and signatures of competent persons, are acceptable).
3. Water Quality Examination Results (Sample(s) taken not earlier than 3 months from the date of application.)
4. At least 3 immediately past Inspection Results of Plumbing related to Water Quality.

**F. Declaration of Water Quality Complaints** (This scheme would accept cases

involving water quality complaints before application if the applicant demonstrates, by the information given below, to have taken appropriate resolution to the complaints within a reasonable time.)

1. Any water quality complaints in the past 12 months?  
No/Yes\*, number of complaints: \_\_\_\_\_
2. Nature of complaints: \_\_\_\_\_  
\_\_\_\_\_
3. Average Handling Time: \_\_\_\_\_  
\_\_\_\_\_
4. Remedial Actions Taken: \_\_\_\_\_  
\_\_\_\_\_
5. All complaints cleared? Yes/No\*

Outstanding Complaints

Nature	No.

**G. Terms and Conditions**

1. I/We\* declare that all the information and supporting documents provided for the purpose of this Application are true, accurate and complete.
2. I/We\* have maintained the plumbing up to a high standard for keeping the good quality of government water supplies throughout the inside service up to the consumers' taps.
3. I/We\* shall ensure that all my/our staff are fully aware of and observe the assessment criteria of the Scheme at all times during the validity period of the Certificate.
4. I/We\* shall co-operate with the Water Supplies Department (WSD) for checking the compliance of the prescribed criteria of the Scheme if considered necessary by the WSD.
5. I/We\* agree that none of the members of the WSD, the Advisory Committee on Quality of Water Supplies (ACQWS) or the Appeal Board of the Scheme shall have any responsibility or liability whatsoever in relation to any dealings between the Scheme Certificate holder and the holder's customers arising from the Scheme.
6. I/We\* shall not behave in a manner which may jeopardize or damage the reputation or interests of the Government of the HKSAR, the WSD, the ACQWS, the Appeal Board of the Scheme.
7. I/We \* abide by that the Certificate remains the property of the WSD and shall return the Certificate when required by the WSD.
8. I/We\* shall not transfer the Certificates to other persons or organizations without the permission of the WSD.
9. I/We\* agree to abide by the decisions of the Appeal Board and the Terms and Conditions of the Scheme.

**Applicant:**

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Name & Title \_\_\_\_\_ Company Chop \_\_\_\_\_

Management Contract Valid Till Date: \_\_\_\_\_

**Supported by Building Owner(s)/Incorporated Owners/Mutual Aid Committee:**

I/We\* understand that if there is a change in building management company the Certificate of the Scheme will expire on that day. For the certificate to remain valid, I/We\* shall instruct the new company to submit an “Undertaking Form for Incoming Building Management Company” (Form B - downloadable from <http://www.wsd.gov.hk>) within 1 month and to continue to observe all the requirements of and the Terms and Conditions of the Scheme).

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Name & Title \_\_\_\_\_ Chop \_\_\_\_\_

English and Chinese Name of BO/IC/MAC : \_\_\_\_\_

\_\_\_\_\_

Correspondence Address: \_\_\_\_\_

*\* please delete whichever not applicable.*