

**To: The Water Authority**

43/F, Immigration Tower, 7 Gloucester Road, Wan Chai, Hong Kong  
e-mail: [wsdinfo@wsd.gov.hk](mailto:wsdinfo@wsd.gov.hk) Telephone: 2824 5000 Facsimile: 2802 7333

<b>For official use only</b>
CCID: _____

**Application for Change of Particulars of a Licensed Plumber**

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

English Name (Surname first): (\*Mr/Ms/Miss/Mrs) \_\_\_\_\_

**Change of Personal Contacts (for communication with the Water Authority only)**

Telephone No.: \_\_\_\_\_

Correspondence Address:

Street Name \_\_\_\_\_ Street No \_\_\_\_\_ Floor \_\_\_\_\_ Room \_\_\_\_\_

Building Name \_\_\_\_\_ Block \_\_\_\_\_

Estate/Village \_\_\_\_\_ Phase Name/No. \_\_\_\_\_

District \_\_\_\_\_ \* Hong Kong / Kowloon / New Territories

Non-structured mailing address (e.g. GPO Box number etc.)

Email Address: \_\_\_\_\_

(for receiving circular letters and other information from WSD by email) (optional)

**Change of Business Contacts (for display in Licensed Plumber Directory)**

Business Telephone No.: \_\_\_\_\_ (optional)

Business Address: \_\_\_\_\_ (optional)

Business Email Address.: \_\_\_\_\_ (optional)

**Civil Servant Status:**

I am not at present a civil servant.

I am a civil servant serving in \_\_\_\_\_ and attach a @proof.  
(name of department)

I note Civil Service Regulations 461 to 466 and 550 to 559 on the subjects of ‘Investment’ and ‘Outside Work’ respectively. Unless approved in accordance with these Civil Service Regulations, I am not allowed to perform outside work as a Licensed Plumber. \*For a staff of Water Supplies Department, I understand that permission will not be given to me to undertake paid or unpaid outside work as a Licensed Plumber in my private capacity, to avoid potential conflict with my official duties.

**Declaration:**

I fully understand and agree that the Water Authority may use the data collected from me in connection with this application for the purposes of, or directly related to, the processing of this application and any matters related to the plumber’s licence (if any) issued under this application. If I do not provide sufficient data, the Water Authority may not be able to process my application. I agree that the data collected may be transferred to other Government bureaux and departments and any other relevant parties for the aforesaid purposes. I understand that I may make a request to the Departmental Secretary of the Water Supplies Department at 48/F., Immigration Tower, 7 Gloucester Road, Hong Kong for access to and correction of my personal data.

I further agree that the above data collected from me (including my name (Chinese and English), plumber's licence number, grade of licence, telephone numbers, the licence expiry date, past/current projects carried out by me) and any information concerning me which is related to the control of licensed plumbers may be made known to the general public (e.g. by publishing the same on the internet).

I declare that all the information in this application is correct, complete and true to the best of my knowledge and belief. I understand that if any of the information in this declaration is untrue, my application will have no effect. I also understand that a person who knowingly and willfully makes a statement or gives information which he knows to be false or does not believe to be true shall be guilty of an offence under the law.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Footnote:

\* Delete as appropriate

@ The proof includes Government ID card, employment letter, pay slip or etc.

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Checked by:	Verified by:
Name:	Name:
Post Title:	Post Title:
Date:	Date: