

THE CHARTERED INSTITUTE OF PLUMBING AND HEATING ENGINEERING – HONG KONG BRANCH

PROFESSIONAL PLUMBER PRACTICAL EXAMINATION (PPPE) REGISTRATION FORM

Candidate's Name (in	English)		(in Chinese)		
Correspondence Addr	ess:				
	Tel. :	Fax. :	Ε-mail: (must be §		
Date of Birth :		(dd/mm/yy)	(must be g	given)	
Academic Qualification	on in Plumbing Rel	ated Engineering* :			
related subject e.g. Civing a local or oversea Gove to decide if the Qualification of For local qualification of For local qualification of the control of t	l and Structural Engi rnment recognized bo ation was fulfilled or twarded in or after 2 twarded before 2020 lification may be acc	ineering, Mechanical Enginody / technical school / Instinoty / technical school / Instinot without appeal mechanical of the programme shall be averted if it could demonstrate		ring, etc. from HKB has rights ucation	
Date of Award :		(dd/mm/yy)			
Membership No. :					
Date of Election to M	embership (e.g. Mo	CIPHE/ FCIPHE):	(dd/mm/yy	<i>i</i>)	
Summary of Post Aca	demic Qualificatio	n Professional Working E	Experience :		
(Please list below in c employment. Continu			of employers, duration a	nd lengths of	
1. Name of Emp	loyer :				
Address :					
			Total length :		
2. Name of Emp	loyer :				
Address :					
		to(mm/yy)			
Candidate's Signature	:	Date :	(dd/mm	/yy)	
Referee's Signature**:		Date:	(dd/mm	(dd/mm/yy)	

^{*}Referee shall be a valid License Plumber issued by Water Supplies Department.