



## Optometrists & Opticians Board

c/o Secretariat of Healthcare Professional Boards (SPB)  
81 Kim Keat Road #10-00 Singapore 328836  
Email: OOB@spb.gov.sg Website: <https://www.oob.gov.sg>

### STATUTORY DECLARATION

I, \_\_\_\_\_ (Name),  
\_\_\_\_\_ (NRIC / FIN no. / Passport no) \*, \_\_\_\_\_ (Occupation)  
of \_\_\_\_\_ (Address),

do solemnly and sincerely declare as follow:

1. I am a registered Optometrist / Optician (Contact Lens Practitioner) / Optician (Refraction and Dispensing) / Optician (Dispensing) \* under the Optometrists and Optician Act (Act 36 of 2007).
2. My certificate of registration / practising certificate \* is lost / destroyed / defaced / obliterated\*.
3. The circumstances under which my certificate of registration / practising certificate \* came to be lost / destroyed / defaced / obliterated\* are as follow:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

And I make this solemn declaration by virtue of the provisions of the Oaths and Declarations Act (Cap.211), and subject to the penalties provided by the Act for the making of false statements in statutory declarations, conscientiously believing the statements contained in this declaration to be true in every particular.

\_\_\_\_\_  
(Signature of person making this declaration)

Declared at Singapore this \_\_\_\_\_ (day) of \_\_\_\_\_ (month) of \_\_\_\_\_ (year)

Before me,

\_\_\_\_\_  
(Signature and title of person whom declaration is made)

*\*Please delete where applicable*