**For Individual Respondents:**

|  |  |  |
| --- | --- | --- |
| **Name** | **Designation/Profession** | **Email address or phone number** |
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**For Organisational Respondents:**

|  |  |  |
| --- | --- | --- |
| **Name** | **Industry** | **Email address or phone number** |
|  |  |  |

**Observations:**

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| Section No. | Remarks | Proposed amendment (if any) |
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