DIRECTOR NOMINATION FORM FORTH SMART SERVICE PUBLIC COMPANY LIMITED

Date

I, Mr./Mrs./Ms.	. ID Card No
Accessible Address	
Telephone No Mobile No	Facsimile No
E-mail address	
No. of shares held in the Company	shares, as at date of
I would like to nominate	who is qualified and does
not possess any forbidden qualifications according to	the Company's criteria to be elected
as the Company's director. I enclose the nominee's	consent and his/her supplementary
documents for consideration.	

I certify that all information written in this Form, the evidence of the shareholding, the nominee's consent, and all supporting documents are true and correct.

Signed	 (Shareholder)
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I, Mr./Mrs./Ms. would like to confirm my consent to be nominated by the Shareholder as stated above, affirm that I am qualified and does not possess any forbidden qualifications according to the Company's criteria, and agree to practice in compliance with the Company's Good Corporate Governance.

Signed	. (Director Nominee)
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(Please attach the evidence of shareholding, i.e. certified letter of the securities company or other evidences issued by SET or TSD.)