

**SECTION 25 ARCHITECTS, PROFESSIONAL ENGINEERS, QUANTITY SURVEYORS ACT, CHAPTER 266**

**APPLICATION TO**

**REGISTER WITH PRACTICING CERTIFICATE AS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|[ ]  Architect |  |[ ]  Professional Engineer |  |[ ]  Quantity Surveyor |
|  |  | Branch: | Choose an item. |  |  |  |

(To be completed by the Applicant in BLOCK LETTERS)

|  |  |
| --- | --- |
| I hereby apply to register with Practicing Certificate for the year:  | Click or tap here to enter text. |
| Registration Number: | Click or tap here to enter text. | Expiry Date: | Click or tap to enter a date. |

1. **PERSONAL PARTICULARS**

|  |  |
| --- | --- |
| Full Name: | Click or tap here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| Date of Birth: | Click or tap to enter a date. | Nationality: | Click or tap here to enter text. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Brunei Identification Card No: | Click or tap here to enter text. | [ ]  Yellow  | [ ]  Red  |  [ ]  Green |

|  |  |
| --- | --- |
| Residential Address: *(Copy of IC as evidence)* | Click or tap here to enter text. |
| Click or tap here to enter text.  |
| Correspondence Address: *(ROCBN/Employment if applicable)*  | Click or tap here to enter text. |
| Click or tap here to enter text. |

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| --- | --- | --- | --- | --- | --- |
| Telephone No: | Click or tap here to enter text. |  | Handphone No: | Click or tap here to enter text. |  |
| Email Address: | Click or tap here to enter text. |

1. **PROFESSIONAL QUALIFICATIONS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No. | Name of Chartered / ProfessionalInstitution | Registration No. or Corporate/Chartered Member No. | Membership Renewal receipt No: | Expiry date:Date: |
| 1 | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap to enter a date. |
| 2 | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap to enter a date. |
| 3 | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap to enter a date. |

1. **EMPLOYMENT PARTICULARS**

|  |  |
| --- | --- |
| Organisation Name: | Click or tap here to enter text. |
| Firm’s Address: | Click or tap here to enter text. |
| Position in Firm: | [ ]  Director with PC(in a body corporate) | [ ]  Owner/partner with PC(in a sole propriety/partnership) | [ ]  Employee with PC |

1. **CPE RECORDS**

CPE record submission are **ONLY** for the renewal of Registered Architects/Professional Engineers/Quantity Surveyors **with PC shall be for the preceding 12 months**

| Name of Event Attended | Venue and/or Organiser | Date | CPE Credit Point(s) and Qualifying Category of Event | Document Attached |
| --- | --- | --- | --- | --- |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap to enter a date. | Choose an item. | Choose an item. |
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| 1. **DECLARATION TO BE SIGNED BY THE APPLICANT**
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| I hereby declare that:1. I have not been convicted of a criminal offence in a court of Law and/or knowingly been investigated in connection with a criminal offence in any country. (If have been convicted and/or investigated, please provide details).
2. I am not an un-discharged bankrupt and an order in bankruptcy against me is not in force.
3. I will inform the Board if an order in bankruptcy against me is in force during the current practicing certificate.
4. I hereby authorise the Board of Architects, Professional Engineers and Quantity Surveyors to seek verification on the information submitted in any manner as it deems fit and proper.
5. I hereby declare that while I am registered, I shall perform my duties and discharge my responsibilities in compliance with Architects, Professional Engineers and Quantity Surveyors Act, Chapter 266 and all notifications / circulars as issued by the Board of Architects, Professional Engineers and Quantity Surveyors.
6. I shall be personally in charge of all professional engineering services rendered for which I certify, stamp and sign all relevant documents. I also hereby declare my competency in the said professional engineering services.
7. I submit herewith the certified true copies of my degree certificates, testimonials, official transcripts, valid registered professional engineer certificate and valid practicing certificate (if renewal), and other relevant documents in support of my application.
8. I shall not shall act as an architect, professional engineer or quantity surveyor in respect of any project in which I am acting as a housing developer.
9. I hereby declare that the particulars in this application are correct and accurate.

Company Stamp\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature

|  |  |
| --- | --- |
| Name: | Click or tap here to enter text. |
| Registration No: | Click or tap here to enter text. |
| Date of Application: | Click or tap here to enter text. |

Verified by Employer (of applicant): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature |

**Attached herewith are:**

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| --- |
|[ ]  Mandatory for all applicants - Copy of Valid Payment Receipts/Card of Professional Membership |
|[ ]  Mandatory for renewals ONLY – Documents/reports/records as evidence of attending CPE Event |
|[ ]  Mandatory for all applicants – Duplicate of Valid Professional Indemnity Insurance for $1,000,000 coverage for PC applicant (Certified by Insurance Agencies ) |
|[ ]  Firm address - Certified True Copy: Certificate of Registration Business Names Act (Section 16 & 17) or Certificate of Incorporation of Private Company (Form X) with company resolution and memorandum of association |
|[ ]  Employment letter for employees |
|[ ]  Copy of IC (with new validity period) |