

**SECTION 17 ARCHITECTS, PROFESSIONAL ENGINEERS, QUANTITY SURVEYORS ACT, CHAPTER 266**

**APPLICATION TO RENEW REGISTRATION AS**

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

(To be completed by the Applicant in BLOCK LETTERS)

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| --- | --- | --- | --- |
| I hereby submit an application to renew for the years **(2 years)** : | | | 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 / Professional  Institution | 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: | Click or tap here to enter text. | | Employee with registration certificate |

1. **CPE RECORDS**

CPE record submission the renewal of **Registration Certificate shall be for the preceding 24 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. |
| 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** |
| I hereby declare that 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).  I hereby declare that:  I am not an un-discharged bankrupt and an order in bankruptcy against me is not in force.  I will inform the Board if an order in bankruptcy against me is in force during the current practicing certificate.  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.  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.  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.  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.  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:

|  |  |
| --- | --- |
|  | Mandatory for all applicants - Copy of Valid Payment Receipts/Card of Professional Membership |
|  | Mandatory for all applicants – evidence of attending CPE events |
|  | Mandatory for all applicants – Employment letter for employees |
|  | Copy of IC (with new validity period) |