Date:…………………

**The Executive Director**

**Construction Industry Development Board**

**5th Floor, Mutual Aid Building II**

**5, Guy Rozemont Square**

**PORT LOUIS**

**Testimonial Provided by Project Owner**

1. I hereby confirm that I ………………………………………………………………………..………*(Name of Project Owner)*holding NIC No. ………………………………………………………………………. *(to enclose copy of ID Card of Project Owner),*entered into a contract with Mr/Mrs/Ms……..…………………………..…………………………………..., bearing ID No. ………………………………………………………………………………..………… and holding Business Registration No. (BRN) …………………………….……………………………………..……, for the following project, and the works were successfully completed to my satisfaction.

|  |  |
| --- | --- |
| **Name of Project Owner** |  |
| **Contract Name** | *eg Construction of House* |
| **Address of Works** |  |
| **Date of Award of Contract** |  |
| **Date of Completion of Contract** |  |
| **Contract Amount** **(at Award) (MUR) (excl. VAT)** |  |
| **Contract Amount** **(at Completion) (MUR) (excl. VAT)** |  |
| **Floor area (in m2 or ft2) for building works** |  |
| **Approved Building and Land Use Plans (BLUP) to be submitted to CIDB *(where applicable)*** |  |
| **Class of Works**  | **Brief Description of Works** | **Breakdown of Value of Works****(MUR) (excl. VAT)** |
| **Building Construction Works** | * *eg casting columns, beams, slabs, construction of blockwalls, rendering, etc.*
 |  |
| **Class of Works** | **Brief Description of Works** | **Breakdown of Value of Works****(MUR) (excl. VAT)** |
| **Civil Engineering Construction Works** | * *eg excavation, pipelaying, roadworks, drainworks, etc*
* *length of drains, walls, etc to be provided*
* *area of construction (where applicable) to be provided*
* *drawings to be provided*
 |  |
| **Mechanical and Plumbing Works** |  |  |
| **Electrical** **Works** |  |  |

1. I, ………………………………………………………………………..………*(Name of Project Owner)*, agree that the CIDB may contact me, using the following details, for any clarifications with respect to the above:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Telephone | : | ………………………………………. | Mobile | : | ………………………....……………… |
| Fax | : | ……………………………………... | E-mail | : | …………………………….…………… |
| Home Address:……………………………………………..…………….….………………………………………………..…….. |

1. I, the Project Owner, alsodeclare that the information given in this Testimonial are to the best of my knowledge true and correct.

Signature of Project Owner:……………………………………. Date:………….………………