

APPLICATION FOR REGISTRATION AS A CONTRACTOR

SECTION A

Name of Applicant: [Note 1]

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Current Registration Reference with CIDB (if any)

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Last Registration Status with Ministry of Public
Infrastructure & Land Transport (if applicable)

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Information

This Form is also available at <http://www.cidb.mu> and may be filled in electronically. However it should be signed and submitted to CIDB, in hard copy together with all the relevant documents as per the attached Checklist.

Applicant shall read the Construction Industry Development Board (Registration of Consultants and Contractors) Regulations 2014 and subsequent amendments thereof together with the Notes to this Form (available at <http://www.cidb.mu>) before completing the Application Form.

If space provided in any section of this Form is not sufficient, Applicant may attach supplementary sheets providing the information in the same format.

A Non-refundable Processing Fee of Rs 1,000 shall accompany the Application. Payment shall be made either in cash or cheque payable to "Construction Industry Development Board".

CIDB shall not be held liable for any delay in processing the Application in case of incompleteness or inaccuracy of information.

SECTION B

1. Classes of Works, Grade and Areas of Specialisation
applying for [Note 2]

Building Construction Works

A+ A B C D E F
B01 B02 B03
B04

Civil Engineering Construction Works

A+ A B C D E F
CE01 CE02 CE03
CE04 CE05 CE06

Mechanical, Electrical and Plumbing (MEP) Works

Mechanical, Electrical & Plumbing Works

A+ A B C D E F
M01 M02 E01 E02

Mechanical & Plumbing Works

A+ A B C D E F
M01 M02

Electrical Works

A+ A B C D E F
E01 E02

SECTION C

1. Business Information

1.1 Business Registration *(Tick as appropriate)*

Individual *(Sole Proprietorship)* Société / Partnership

Company

Other *(Specify):*

Date of Incorporation:

VAT Registration No.:

Business Registration No.:

Copy of (i) Certificate of Current Standing of Firm issued by the Registrar of Companies, (ii) Certificate of Incorporation, (iii) VAT Registration Certificate, (iv) Business Registration Card, (v) Trade Fee Receipt for current period and shall be submitted.

1.2 Contact Details

Telephone No.: Fax No.:

E-mail Address:

Website:

Physical Address:

Postal Address:

1.3 Authorized Contact Person

Mr/Mrs/Ms: First Name:

Surname:

Designation:

Tel No.: Fax No.:

Mobile No.:

E-mail Address:

1.4 Geographical Areas of Operation *(Tick as appropriate)*

Mauritius Rodrigues & Outer Islands

Other Countries *(specify):*

1.5 Is applicant registered with any Construction Registration Body?

Yes No

If yes, please give the following details

Registered as:

Name of Registration Body:

Contact Details of Registration Body

Address:

Email Address:

Tel No.:

Copy of Certificate of Registration issued by Registration Body shall be submitted.

1.6 Has applicant ever been subject to Insolvency, Bankruptcy or placed under Liquidation or Judicial Management?

Yes No

If yes, please give a Brief Statement thereof.

1.7 Has applicant ever been debarred or suspended as a Contractor?

Yes No

If yes, please give details in the annexed Debarment/ Suspension Data Sheet **[RG6A]**

2. Directorship of Firm [Note 3]

Name of Directors	Address	Citizenship	Professional Qualifications	Status of Directors ¹	Other Directorship ²

¹ State 'ED' for Executive Director and 'NED' for Non-Executive Director

² State Name of other Construction Companies in which incumbent is also a Director

3. Shareholdings [Note 4]

3.1 Shareholdings of the Company

Shareholders	Percentage
Total percentage of Mauritian Shareholdings	
Total percentage of Non - Mauritian Shareholdings	

3.2 Details of Mauritian Shareholdings

Name of Shareholders	Professional Qualifications (If any)	% Shareholding

* If a shareholder is also a Director of the Firm, please state 'ED' for Executive Director and 'NED' for Non-Executive Director

4. Subsidiaries/Associated Companies in Construction Business

Name of Companies	Applicant's % Shareholding

SECTION D**Financial Standing**

The information provided in this Table should be as per the last Financial Statements (Audited if available).

Details	Year (.....)*
Currency	
Current Assets	
Current Liabilities	
Net Profit after Tax	
Depreciation	
Long-Term Liabilities	

*State Year

SECTION E**Turnover for Construction Works in the last 5 years [Note 5]**

Year <i>(in Chronological Order)</i>	Breakdown of Turnover				Total Turnover (Rs)
	Building Construction Works	Civil Engineering Construction Works	Electrical Works	Mechanical Works	
	(Rs)	(Rs)	(Rs)	(Rs)	

If applicant is applying for registration in more than one Class of Works, he should provide ,a breakdown of turnover to indicate the value of works allocated to each Class.

SECTION F**1. Projects Completed in last 5 years**

Year <i>(in Chronological Order)</i>	No. of Projects

Details of each Project Completed in last 5 years shall be given in the annexed Project Description Sheet. **[RG6B]**

Copy of Letter of Award for each Project and Testimonials (if any) from Clients and Consultants shall be submitted.

2. State number of Projects, during the last 5 years, which were subject to Termination of Contract/ Arbitration/ Legal Proceedings

Details of each such Project shall be given in the annexed Statement of Termination of Contract/ Arbitration/ Legal Proceedings. **[RG6C]**

3. Project of Highest Value in the last 5 years [Note 6]

Details of the Project of Highest Value for each Class of Works (ONLY one Project) undertaken in the last 5 years shall be submitted in the annexed Highest Value Project Description Sheet **[RG6D]**

SECTION G**1. Constructional Plant/Equipment/Vehicles OWNED**

Plant/Equipment/Vehicles	Make, Model and Capacity (h.p)	Year of Registration	Replacement Value (Rs)
Total			

Copy of Current Certificate of Insurance for each of the above items, shall be submitted.

2. Constructional Plant/Equipment/Vehicles HIRED

The information provided in this Table should be as per the Audited Financial Statements of the respective years.

Name of Plant/Equipment/ Vehicles	Rental Amount paid in last 5 years in Rupees					Total
	Year (.....)*	Year (.....)*	Year (.....)*	Year (.....)*	Year (.....)*	
Total						
Average for the last 5 years						

* State Year

SECTION H**Human Resources [Note 7]****1. Qualified Personnel**

Provide information in the format below on every Qualified Personnel in the field of Architecture, Engineering, Quantity Surveying and Project Management in Construction.

SN	Name	Citizenship	Designation	Qualification	FT/ PT*	Years of Experience	Professional Registration (Reg.)		
							Body	Reg. Yr.	Reg. No.

No. of Registered Professionals

Total

* State 'FT' for Full Time and 'PT' for Part Time
A Qualified Personnel should be holder of at least a First Degree.
Copy of Firm's Organigram shall be submitted.

2. Technical & Administrative Staff [Note 8]

Category	No.	Sum of Years of Experience
Qualified Technical / Supervisory Staff (Diploma Holder)		
Non-Qualified Technical / Supervisory Staff		
Administrative Staff		
Occupational Safety & Health Officers		
Competent Persons for Scaffolding Supervision		

Copy of Safety & Health Policy Document of Firm (if any), shall be submitted.

3. Labour Force

(Skilled Labour includes Equipment Operators/Artisans/Craftsmen/Masons/Plumbers, etc)

Gender	No. of Skilled	No. of Unskilled	Total
Male			
Female			
Total			

Labour Force is the total of all Local & Foreign Skilled & Unskilled employees

4. Foreign Employees

Category	Male	Female
No. of Professionals		
No. of Technical/ Supervisory Staff		
No. of Skilled Labour		
No. of Unskilled Labour		
Total		

SECTION I

1. Training Facilities

Does the Firm have in-house training facilities?

Yes No

% of HRDC grant ceiling allocated to training: %

Provide a statement with full details of the in-house training facilities.

2. Quality Management System [Note 9]

(Tick as appropriate)

(i) Has any Quality Management System been implemented in the Firm? Yes No

(ii) Is the Firm registered with a Third Party Certification Body?

A Brief Statement on the Quality Management System and copy of Certificate of Registration from Third Party Certification Body shall be submitted.

3. Occupational Health and Safety Management System

(i) Has any Occupational Health and Safety Management System been implemented in the Firm? *(Tick as appropriate)* Yes No

(ii) Is the Firm registered with a Third Party Certification Body?

A Brief Statement on the Occupational Health and Safety Management System and copy of Certificate of Registration from Third Party Certification Body shall be submitted.

4. Environmental Management System

(Tick as appropriate)

(i) Has any Environmental Management System been implemented in the Firm? Yes No

(ii) Is the Firm registered with a Third Party Certification Body?

A Brief Statement on the Environmental Management System and copy of Certificate of Registration from Third Party Certification Body shall be submitted.

Declaration

(by Authorized Signatory)

I do hereby declare that the
(Full Name in BLOCK Letters)
information given on this Application Form and the information submitted in the documents attached hereto are to the best of my knowledge true and correct.

I authorize the Construction Industry Development Board to conduct any enquiry if required, from any third party in order to verify the accuracy of the information provided.

I understand that any false declaration or misstatement with respect to this application is an offence which may result in fine and imprisonment and/or rejection of this application and/or cancellation/suspension of any other registration with the Board in accordance with the Construction Industry Development Board Act and Regulations thereunder.

Authorized Signature:

Name:

Designation:

Date:

Seal of Company

Sheet No.:

PROJECT DESCRIPTION SHEET (Section F)

(to be filled in for each Project)

Project Title:

Name and Contact Details of Client:

Class of works:

Initial Contract Value (Rs):
(VAT exclusive)

Final Contract Value (Rs):
(VAT exclusive)

Name of Subcontractor:

Value of Work Subcontracted (Rs):
(VAT exclusive)

Start Date: Scheduled Completion Date: Actual Completion Date:

Duration of Extension of Time:
(in days)

Detailed Description of overall Project:
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Detailed Description of Work Subcontracted:
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**STATEMENT OF TERMINATION OF CONTRACT/
ARBITRATION/LEGAL PROCEEDINGS (Section F)**

(to be filled in for each Project)

Sheet No.:

Project Title:

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Name and Contact Details of Client:

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Contract Value (Rs):

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(VAT exclusive)

Percentage of works completed under the Contract:

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Start Date:

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Termination Date:

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Detailed Description of overall Project:

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Description of circumstances that led to Termination/ Arbitration/ Legal Proceedings:

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HIGHEST VALUE PROJECT DESCRIPTION SHEET (Section F)

(To be filled in for each Class of Works)

Sheet No.:

Project Title:

Name and Contact Details of Client:

Final Contract Value (Rs):

(VAT exclusive)

If the Project was undertaken in Joint Venture, state the:

(i) Name of Parties to the Joint Venture:

(ii) % of Works undertaken by Applicant:

%

Name of Sub-contractor:

Final Contract Value of Work Sub-contracted (Rs):

(VAT exclusive)

Start Date:

Completion Date:

Detailed Description of overall Project:

Detailed Description of Work Subcontracted:

Checklist

Copy of documents to be submitted with Application
Original to be produced for verification purposes

(Tick as Appropriate)

	Submitted by Applicant	Received <i>(for Office use)</i>
1. Certificate of Current Standing of Firm	<input type="checkbox"/>	<input type="checkbox"/>
2. Certificate of Incorporation	<input type="checkbox"/>	<input type="checkbox"/>
3. VAT Registration Certificate	<input type="checkbox"/>	<input type="checkbox"/>
4. Business Registration Card	<input type="checkbox"/>	<input type="checkbox"/>
5. Trade Fee Receipt for current period	<input type="checkbox"/>	<input type="checkbox"/>
6. Last Job Contractor's Permit	<input type="checkbox"/>	<input type="checkbox"/>
7. Registration Certificate from Construction Registration Body	<input type="checkbox"/>	<input type="checkbox"/>
8. Statement of Insolvency/Bankruptcy/Liquidation/Judicial Management	<input type="checkbox"/>	<input type="checkbox"/>
9. Debarment/Suspension Data Sheet [RG6A] (No.:.....)	<input type="checkbox"/>	<input type="checkbox"/>
10. Financial Statements for last 5 years (Audited if available)(No.:.....)	<input type="checkbox"/>	<input type="checkbox"/>
11. Project Description Sheet [RG6B] (No.:.....)	<input type="checkbox"/>	<input type="checkbox"/>
12. Letter of Award for Projects Completed in last 5 years (No.:.....)	<input type="checkbox"/>	<input type="checkbox"/>
Testimonials from:		
(i) Clients : (No.:.....)	<input type="checkbox"/>	<input type="checkbox"/>
(ii) Consultants : (No.:.....)	<input type="checkbox"/>	<input type="checkbox"/>
13. Statement of Termination of Contract/ Arbitration/ Legal Proceedings [RG6C] (No.:.....)	<input type="checkbox"/>	<input type="checkbox"/>
14. Highest Value Project Description Sheet [RG6D] (No.:.....)	<input type="checkbox"/>	<input type="checkbox"/>
15. Current Certificate of Insurance of Plant/Equipment/Vehicles (No.:.....)	<input type="checkbox"/>	<input type="checkbox"/>
16. Organigram of Firm	<input type="checkbox"/>	<input type="checkbox"/>
17. Statement of In-house Training Facilities	<input type="checkbox"/>	<input type="checkbox"/>
18. Statement of Quality Management System	<input type="checkbox"/>	<input type="checkbox"/>
19. Certificate of Registration from Third Party Certification Body for Quality Management System	<input type="checkbox"/>	<input type="checkbox"/>
20. Safety and Health Policy Document of Firm	<input type="checkbox"/>	<input type="checkbox"/>
21. Power of Attorney/Board Resolution of Authorized Signatory	<input type="checkbox"/>	<input type="checkbox"/>

