

**CONSTRUCTION DEVELOPMENT BOARD**  
**CONSULTANT REGISTRATION FORM (CRF01)**

**SECTION I: GENERAL INFORMATION**

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**1 Date of application:** \_\_\_\_\_

**2 Type of application (please check):**

<input type="checkbox"/>	New registration
<input type="checkbox"/>	Re-registration

**3 Current CDB registration number:** \_\_\_\_\_  
*(for re-registration)*

**4 Name of applicant/firm: M/s** \_\_\_\_\_

**5 Name of owner, partners and/or others with controlling interest:**

Name	Designation	ID #	Nationality	Sex

**6 Census address of applicant/firm:**

Address 1:		
Address 2:		
Dzongkhag:	Country:	Post Code:

**7 Establishment address of applicant/firm:**

Address 1:		
Address 2:		
Dzongkhag:	Country:	Post Code:

**8 Telephone No. :** \_\_\_\_\_

**9 Fax No. :** \_\_\_\_\_

**10 E-mail address:** \_\_\_\_\_

**11 Type of classification headings applied (check appropriate box/boxes):**

<input type="checkbox"/>	a. Civil Engineering Services
<input type="checkbox"/>	b. Architectural services
<input type="checkbox"/>	c. Electrical Engineering services

**a. Civil Engineering services**

Category	Remarks
C1 Structural	
C2 Geo-Tech Studies	
C3 Social & Environmental Studies	
C4 Road and Bridges	
C5 Irrigation & Water Resources Engg.	
C6 Construction Management and Supervision	
C7 Services: Water Supply, Sanitation, sewerage, Solid Waste and Surveying	

**b. Architectural services**

Category	Remarks
A1 Architectural and Interior Design	
A2 Urban planning	
A3 Landscaping and Site Development	

**c. Electrical Engineering services**

Category	Remarks
E1 Rural electrification and Transmission line	
E2 Urban electrification & Communication and Scada	
E3 Sub-station	
E4 Major Hydro Power Construction	
E5 Small Hydro Power Construction	
E6 Mini Hydro Power Construction	
E7 House Wiring	

**SECTION II: FINANCIAL CAPACITY**

**12 Financial Information of Application/Firm**

a) Please list the following financial data for the previous three (3) years:

Description	In Nu.			Average Annual Income
	Year ( )	Year ( )	Year ( )	
Total Gross Income				

b) Total Assets: Nu. \_\_\_\_\_

c) Total Liabilities: Nu. \_\_\_\_\_

d) **Total Net Worth (b - c):** Nu. \_\_\_\_\_

**Notes:**

1. Total gross income should include realized income from all sources of business.
2. Assets must be registered in the name of the applicant/firm.

**13 Credits, Loans and Overdraft Facilities**

Please list the total credits received for the purpose of contract works during previous two years:

Name of Bank/Creditor	In Nu.		Average Annual Credit
	Year ( )	Year ( )	
			X
			X
			X
<b>Total credits, loans and overdrafts</b>			

**Notes:**

1. Attach confirmatory statements from the bank/creditor describing the credits provided.
2. If necessary, attach additional sheets.

**14 Bank Facilities**

Name of Bank: \_\_\_\_\_

Address of Bank: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Bank Account No.: \_\_\_\_\_

**Notes:** 1. If necessary, attach additional sheets to describe more than one bank facility.

**SECTION III: HUMAN RESOURCES**

**15 Number of Key Personnel:**

	Designation	Permanent		Name(s)		Remarks
		Bhutanese	Expatriate	Bhutanese	Expatriate	
<b>KEY PERSONNEL</b>	Manager					
	Engineer, Graduate					
	Engineer, Diploma					
	Architect					
	Social/Environmental Engineer					
	Draft Person					
	<b>Total key personnel</b>					
	Others					
	<b>Total personnel</b>					

*Please attach the Curriculum Vitae (CV) of each key personnel in the sample format of Attachment A, include any competency certificates.*

**SECTION IV : EQUIPMENT AND FACILITIES**

**16 For each of the categories applied, please list the type of equipment and facilities owned.**

**Notes:**

1. Only equipment listed on the enclosed list of qualifying equipments will be considered.
2. Documentary evidence of ownership must be provided for the equipment to be considered.
3. All equipment must be operable at the time of registration.

SI #	Type of Equipment	Description	Registration Number	Chassis or Serial Identification Number	Engine Identification Number
1	Soil Studies Equipment				
2	Survey Equipment				
3	Multi-meter				
4	Four Terminal Earth Tester				
5					
<b>Total value of equipment and facilities owned:</b>					<b>Nu.</b>

## SECTION V: TRACK RECORD

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Please provide information on consultancy works completed by your firm or joint venture for each category applied for. If applying for more than one category, please list your experience under the category that best described the work. Please only list projects that started within the past two years. To be evaluated, all projects listed must be supported by copies of contract, work orders, or other documentation that clearly illustrates the project's particulars. Please clearly list projects from oldest to newest. Photocopy or duplicate this form if more space is required.

Contract Start Date	Contract/Work Order Ref. #	Contract Description	Client	Contract Value

- Note:**
1. If joint venture, the contract value shall be the total value of the contract.
  2. If subcontract works, the contract value shall be the value of the subcontract and the start date shall be for the subcontract works.

## DECLARATION

1. I/We declare and confirm that:-
  - a. The information submitted herein concerning the Applicant/Firm's financial capacity, personnel, plant & equipment and track record pertains solely to the Applicant/Firm and that such information does not relate to or arise from any other Applicant/Firm registered or to be registered at the CDB in which I/We have any interest and/or controlling interest by way of either direct or indirect ownership.
  - b. All information and attachments submitted in this application are true and correct.
  - c. I/We are aware that any false information provided herein will result in the rejection of my application and suspension of any registrations granted.
  - d. I/We shall not make refund claims of expenditure incurred in processing this application
  
2. I/We enclosed herewith receipt number \_\_\_\_\_ in the amount of Nu. \_\_\_\_\_ for processing fee.

\_\_\_\_\_  
*(Signature of Owner(s))*

Name(s) in full \_\_\_\_\_

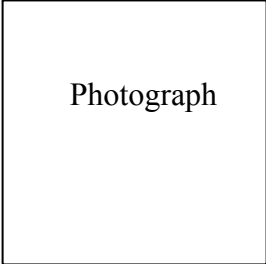
I/D No(s)  
\_\_\_\_\_

In the capacity of \_\_\_\_\_

Date \_\_\_\_\_

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**CURRICULUM VITAE (Format)**



**NAME:**

**DATE OF BIRTH:**

**PROFESSION:**

**NATIONALITY:**

**PRESENT ADD:**

**TEL:  
Email:**

**MEMBERSHIP:**

**KEY QUALIFICATION:**

**EDUCATIONAL QUALIFICATION:**

**EXPERIENCE RECORD: (starting from state all employment records after graduation)**

**Employer:**

**Period:**

**Position Held:**

**Responsibilities:**

**OTHER TRAININGS**

**PUBLICATIONS (if any)**

**COMPUTER KNOWLEDGE**

I the undersigned certify that to the best of my knowledge and belief this bio-data correctly describes myself my qualifications and my experience. I understand that any willful misstatement described herein may lead to my disqualification or dismissal if engaged (indicate yes or no in the following boxes).

**YES**   **No**

**SIGNATURE:**

<b>Date of Signing: /</b>	<b>Day:</b>	<b>Month:</b>	<b>Year:</b>
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