Form No: **PAB 001-R1**

SRI LANKA INSTITUTE OF ARCHITECTS

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9. Qualifications of Directors/Individuals/Partners other than the Architects (Applicable for above 7.3 and 7.4 only). Please submit certified copies of relevant documents to prove their Professional Qualifications. Professional qualifications of allied professions only.

Name	Designation	Professional Qualifications	Year of Award	Mem. No.

Notes:	
Signature: Date:	
Name of Architect (Individual Practitioner/ Sole Proprietor/ Principal Partner/ Director)	
I/We understand that including this information in the Year Book is a privilege of SLIA decision is the final decision.	and SLIA's
I, Archt. in the capacity of Individual Practitioner/Sole Proprietor/Partner in our Partnership/Direct Limited liability Company of the said Practice and being a Member of SLIA hereby declare that to out in support of this application are true, and I further state that the proposed practice will be according to the SLIA Code of Professional Conduct and Subject to the Practice Regulations, of force.	ctor of the che facts set carried out
The Architectural practice is expected to practice following the SLIA Acts and the Under Clause 1.2 Practice of Architecture of Gazette No. 2053/15 - Tuesday, Januar and the subsequent Regulations.	
10. If there is/are any other Practice or Practices Registered with SLIA where Director/Partner or Proprietor. Please indicate the name of the Practice, Mode & your position.	osition.

- SLIA reserves the right not to register a Practice if it does not comply with the Regulations. 1.
- 2. It is the Members' responsibility to furnish accurate details and SLIA shall not be held responsible for any inaccuracy or discrepancy arising in publishing such information.
- This approval is valid only for the mode of Practice mentioned in the application. 3. A separate application shall be forwarded for approval if the Mode of Practice is altered.
- 4. Please refer to the SLIA Practice Regulations 6.1.1 up to 6.3.5. of the Gazette No. 2041/18 dated 17th October 2017 attached herewith.
- A Registration Fee of Rs. 1,100/- + VAT is payable for all new practices. 5.

CHECK SHEET FOR SUBMISSIONS

(To be filled by the Applicant

For Office use only

Practice Category	Document	(√)/ (X)	No. of copies attached	Acknowledged by PAB
7.1 Individual	* Copy of the ARB Registration Certificate ratified by the ARB Registrar * Copy of the Certificate of Professional Qualification ratified by a JP *Affidavit to prove the Sri Lankan Citizenship			
7.2 Sole Proprietorship	* Copy of the ARB Registration Certificate ratified by the ARB Registrar * Copy of the Business Registration Certificate ratified by a JP * Copy of the Certificate of Professional Qualification of Directors ratified by a JP *Affidavit to prove the Sri Lankan Citizenship	,		
7.3 Partnership	* Copy of the ARB Registration Certificate ratified by the ARB Registrar * Partnership Agreement * Copy of the Certificate of Professional Qualifications ratified by a JP * Copy of the Business Registration ratified by a JP *Affidavit to prove the Sri Lankan Citizenship			
7.4 Private Limited Liability	* Copy of the ARB Registration Certificate ratified by the ARB Registrar * Copy of the Business Registration Certificate ratified by a JP * Copy of the Articles of Association ratified by a JP * Copies of the Certificate of Professional Qualification of Directors ratified by a JP *Affidavit to prove the Sri Lankan Citizenship			

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INSTRUCTIONS

- * 1 to 8 are self-explanatory.
- * 9. Directors / Individuals / Partners shall be from allied Professionals such as construction industry-related engineering, quantity surveying, urban design, interior design, landscape architects, planners etc.
- * 10. Please clearly indicate your involvement or if you are not involved clearly indicate "NOT INVOLVED"