

CONTRACTORS REGISTRATION BOARD

APPLICATION FORM FOR FIRST REGISTRATION AS CONTRACTORS

By-law 3(1)(a)

For Official Use only					
Application form received of	on:	Application reco	eived by		
Processing fee paid on:		Receipt No.			
Application fee paid on:		Receipt No.			

- NOTES: (i) Should the space provided with application Form prove insufficient, additional details may be provided on a separate sheet of paper
 - (ii) Applicants failing to submit complete information within six months from the date of submission of this application, the application shall be dismissed without refund of application fees.
 - (iii) Application Form with incomplete submission shall not be processed
 - (iv) Applications forms purchased must be submitted to the Board within twelve months from the date of purchase
 - (v) Application form shall be submitted along with a non refundable processing fee of Tshs. 50,000/=
 - (vi) Submit Passport size photo of company Technical Director endorsed on the back.
 - (vii) All key copies of supporting documents must be certified as true copies of the original
 - (viii) Application forms must be filled in Block letters or Printed
 - (ix) Application by a company registered as Sole Proprietor/Partnership shall be limited to Class Six for General Contractors and Class Two for Specialist.

SECTION I: COMPANY PROFILE

1.	Company's Name in full
2.	Address of Head Office:
3.	Contact Detail:
	Telephone NoFax No
	E-mailWebsite:
4.	Banker's Name(s) and Address(es):
5	Place (s) of Business (<i>i.e. Location of Main and Branch Offices</i> (House/Plot No. Block No. Street and Village/Town/City)

	1				
	S/No.	Name	Qualification	Nationality	%Shares
10.	against the technic	ations/experience and na <i>ally qualified shareholders/pa</i> r shareholder will be held	<i>ertners</i> . Áttach also ar	n affidavit declaring	
9.	(i. Applicable to C	Capital: Companies which are limited l t least 51% of registered share	by shares as shown in th	heir Memorandum and	d Articles of cant category).
8.	No. of Certifica (Photocopy of Cert	te of Incorporation/Regi <i>tificate required</i>)	stration of Business	Names:	
7.	Class Applied for	or (<i>in words</i>)			
6.	Type of Contra	cting Business ¹			

- /		······	
1	 		
2	 		
3	 		
4	 		
5	 		

SECTION II: FINANCIAL STATUS OF THE COMPANY/FIRM

- 11 Capital and Other Financial Resources in Possession of/or Available to, the Firm (Specify & Attach Current Certified Bank Statement)(Within Six months)
 - (i) Cash in bank
 - (ii) Stocks and other securities held and redeemable in Tanzania at market prices.....
- 12. Company's Fixed (Immovable) Assets (Certified Photostat copies of documents proving ownership and value i.e. Letters of offers or Title deeds and valuation report from approved valuers should be attached).

S/N	Name of Asset	Value	Document Attached
1			
2			`
3			

NB: Plant and Equipment are not Fixed Assets for the purpose of registration.

¹ State whether Civil, Building, Mechanical, Electrical or Specialist. *Specialist contractors should state clearly the field of specialization e.g. Air-conditioning, Drilling, Glazing, etc.*

SECTION III: OFFICE AND SERVICE FACILITIES

13. Particulars of office, workshop and storage yard

Establishment	Size (m ²)	No. of Rooms
A. OFFICE		
B. SERVICE WOKSHOP		N.A.
C. YARD		N.A.

14. Safety gear

SN	Type of Safety Gear	Quantities
1	Gloves (pairs)	
2	Overall/Overcoat	
3	Helmets	
4	Goggles/Welding Shield	
5	Safety Boots	
6	Safety Belts	
7	Reflective Jackets	
8	First Aid Kit	

SECTION IV: STAFF QUALIFICATIONS

Particulars of Permanent Personnel (Including Directors/Partners, Technical and Administrative Staff)² 15.

Name of Personnel ³	Nationality ⁴	Academic Qualifications ⁵	Status and Position in Company ⁶	Working Experience (No. of years)	Terms of Employment (Permanent or Contract)

Signature and Official Stamp

..... Date

 ²Attach copy of contract agreements of technical staff
⁵ Attach Certified Certificate or Testimonials and CV(s)
⁶ Shareholders should be shown clearly
⁴ Attach photocopy of Passport and Work Permits in case of foreign nationals

SECTION V: PLANT AND EQUIPMENT OWNED

16. <u>Particulars of Construction Plant & Equipment and Vehicles Owned by Company</u>:

Type/Make/Model	Date of Manufacture	Registration No/Serial No/ ⁷	Condition of Equipment ⁵
	Manufacture	Other Identification Mark	Equipment
	Type/Make/Model	Type/Make/Model Date of Manufacture Image: Image	Type/Make/Model Date of Manufacture Registration No/Serial No/ 7 Other Identification Mark Image: Image of the strength of the strengt of the strength of the strength of the strengt of the strength o

Signature and Official Stamp

.....

Date

⁷ Attach copies of Registration License and/or any other documents as proof of ownership

SECTION VI: HANDTOOLS AND TES	TING EQUIPMENT OWNED
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S/N	Name of Handtools	Make/Mode	Quantity owned	Condition
1				
2				
3				
4				
5				

S/N	Name of Equipments	Make/Mode	Quantity owned	Condition
1				
2				
3				
4				
5				

SECTION VII: REFERENCES

16. Names and Qualifications of at least two Referees. Referees must be registered Architects, Quantity Surveyors or Professional Engineers. The referee must be a person who knows and can comment on the performance of the firm as per attached reference forms.

Name:	Registration No³	Postal Address	Telephone
1			
2			

SECTION VIII: DECLARATION⁴

- 17. I/We the undersigned hereby declare as follows:-
 - (i) My/our signing of this application form implies acceptance of responsibility for the veracity and accuracy of all information submitted therein or therewith.
 - (ii) The information given will be used by the Contractors Registration Board for the purpose of evaluating this application for registration. Such registration will be approved at the sole discretion of the Board.
 - (iii) Any employer, consultant or banker, past or present, is hereby authorised and requested to provide information on the competence and general reputation of our firm if so requested by the Board.
 - (iv) The Board is welcome to visit and physically inspect my/our establishment and works (contracts) executed, when it deems fit to do so, in order to verify the authenticity of the information given herein, or by our Referees, or obtained from any other source regarding our firm.
 - (v) Failure to complete any part of this application form may result in not being registered.
 - (vi) My/our firm shall not be engaged in any acts of bribery or corrupt practices in whatever form.

Dated	this		day of	 2	20	 •••••			
(i) letters)	Signed	by		 		 	(Name	in	Block
in the c	capacity	of		 		 (status	in Firm,)	

Signature

³ Registration Number from relevant Professional Board must be given.

^{4:} The signatory must be the Managing Director of the company, if not power of Attorney authorizing other person must be attached

SECTION IX

LIST OF ATTACHMENTS TO BE SUBMITTED

- 1. A DULLY FILLED. SIGNED & STAMPED APPLICATION FORM (CRB F1)
- 2. CERTIFICATE OF INCORPORATION OR REGISTRATION
- 3. PROOF OF OWNERSHIP OF OFFICE (I.E. RENT/LEASE AGREEMENT ENDORSED BY ADVOCATE OR CERTIFICATE OF OCCUPANCY IF OWNED BY ONE OF SHAREHOLDERS/PARTNERS)
- 4. CV'S OF SHAREHOLDERS/PARTNERS EACH WITH CERTIFIED COPY OF SHARE CERTIFICATE AND CERTIFIED ACADEMIC/PROFESSIONAL CERTIFICATE *(FOR QUALIFIED SHAREHOLDER/PARTNERS)*
- 5. CV'S OF KEY PERSONNEL & CERTIFIED COPY OF ACADEMIC/PROFESSIONAL CERTIFICATE WITH RESPECTIVE **EMPLOYMENT CONTRACTS** FOR EACH STAFF.
- 6. RECENTLY TAKEN PASSPORT SIZE PHOTOGRAPH OF THE TECHNICAL DIRECTOR ENDORSED AT THE BACK BY ADVOCATE (ACCOMPANIED BY CERTIFICATE OF SERVICES OR LETTER FROM IMMEDIATE/PREVIOUS EMPLOYER CONFIRMING THAT HE/SHE IS NO LONGER AN EMPLOYEE)
- 7. CERTIFIED TRUE COPIES OF REGISTRATION CARDS/PROOF OF OWNERSHIP OF PLANT AND EQUIPMENT. *(SHOULD BEAR THE NAME OF FIRM OR SHAREHOLDER)*
- 8. CERTIFIED CURRENT BANK STATEMENT BEARING NAME OF THE FIRM OR SHAREHOLDERS/PARTNERS (FOR APPLICANTS APPLYING IN CLASS SIX OR ABOVE AND SHOULD BE WITHIN SIX MONTHS FROM THE DATE OF SUBMISSION)
- 9. PROOF OF FIXED ASSET OWNERSHIP IF ANY (*I.E. TITLE DEED & ASSET VALUATION REPORT PREPARED BY APPROVED VALUER*)
- 10. DULLY FILED & SIGNED ANTI BRIBERY PLEDGE.
- 11. REFEREES FORM. *(DULLY FILLED AND SIGNED)*
- 12. COMPANY MEMORANDUM & ARTICLES OF ASSOCIATION OR EXTRACT FROM REGISTRAR OF BRELA.



CONTRACTORS REGISTRATION BOARD

P.O. Box 13374 **DAR ES SALAAM** Tel No. 2131169/2137962-3 *FAX NO. 2137964* E-mail: <u>crbhq@crbtz.org</u> **CRB – F4**

CURRICULUM VITAE FOR SHAREHOLDERS OR PARTNERS OF CONSTRUCTION FIRM – Bylaws 3(2) (Each Shareholder/Partner of the Company should fill this Form)

PART A: PERSONAL BIODATA:

1.	Names:	Surname: First: Middle:
2.	Date of Birth:	Year: Month: Date :: Place of Birth:
3.	Nationality:	
		Passport No Date of Issue:
4.	Residential Address:	Street: Town/City: Country:
5.	Postal Address:	P.O. Box Tel No. Town/City: Country:
6.	Non-Citizen	Passport No.: Date of Issue: Resident Permit No. ¹
7.	(a) Number of Shares Held ²	
	(b) Percentage of Shares Held	

¹Attach copies of residence permit ²Attach copies of Share Certificates

PART B: FORMAL TRAINING

S/N	Date		Schools/College/University	Certificate/Award ³
	From	То		

PART C: WORKING EXPERIENCE

Date		Employer/Organization	Position	Duties and Actual Assignments Executed ⁴
From	То			

PART D: DECLARATION

I declare that the information given above is correct.

Signed:

Date:

³Attach copies of certificates awarded ⁴Technical Director to submit a detailed CV.

CONTRACTORS REGISTRATION BOARD CRB – F3 ANTI BRIBERY PLEDGE – Bylaws 3(1) (c) (vii)

(To be signed by all applicants for First Registration or Upgrading)

M/S.....(name of applicant)

Recognises, that corruption has a devastating impact on the social and economic development of any country. We share in the growing global consensus that action is needed to strengthen transparency and accountability, particularly in international development, trade and investment.

M/Stherefore pledged to support the effect of the Government of the United Republic of Tanzania and to participate, along with the Contractors Registration Board and other members of the business community and financing institutions, in forming a coalition against corruption.

M/S.....Welcomes the action taken by the Government to strengthen transparency and accountability. In this context we will:-

- (a) not offer or give any bribes or any other form of inducement to any public official in connection with a pending bid.
- (b) not permit anyone (whether our employee or an independent commission agent) to do so on our behalf.
- (c) make full disclosure in our bids of the beneficiaries of payments relating to the bids to any person other that employees but including bonus payment which may made to employee.
- (d) formally undertake to issue instructions to all our employees and agents or other representatives in Tanzania directing them all times to comply with the laws of Tanzania and in the particular not to offer or to pay bribes or other form of inducement to officials, whether directly indirectly.

(to be signed by Chief Executive Officer of the firm) Date



P.O. Box 13374 **DAR ES SALAAM** Tel No. 2131169/2137962-3 2132508/2132510 *Fax No. 2137964* E-mail No. crbhq@crbtz.org

Ref. No:

Date: .../.../20.....

M/S. Eng/Arch/Qs. P.0.Box

Dear Sir,

RE: PROFESSIONAL / TECHNICAL REFERENCE

They have given us your name as a Person who is well placed to make a fair assessment of their competence, experience and capability to execute contracts of the size and type of works being applied for.

We would very much appreciate if you could fill in the attached questionnaire and return to the undersigned at your earliest convenience, bearing in mind that you may be summoned by the Board to substantiate your responses in the questionnaire as and when an inquiry into the professional conduct of the applicant is needed in accordance with the provision of Section 16(2) (b) and (c) of Contractors Registration Act No. 17 of 1997.

The Classes of registered contractors are given below for your guidance together with an indication of the size of contract the contractor is allowed to undertake in each class. The figures are given for any one (single) contract.

	CLASS	CLASS LIMIT FOR ANY SINGLE CONTRACT (In Million TShs.)				
CLASS	Civil	Building	Mechanical	Electrical	Specialist	
ONE	Unlimited	Unlimited	Unlimited	Unlimited	<i>Unlimited</i>	
TWO	5,000	3,000	2,000	2,000	400	
THREE	3,000	2,200	1,200	1,200	150	
FOUR	1,500	1,200	600	600	-	
FIVE	750	600	300	300	-	
SIX	300	200	150	150	-	
SEVEN	150	120	75	75	-	

Yours Sincerely,

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RHOBEN NKORI REGISTRAR

12 State type of Contractor (Civil/ Mechanical /Building / Electrical or Specialist)

SUISS REGISTRE		ONTRACTORS REGISTRATION OARD	P.O. Box 13374 DAR ES SALAAM Tel No. 2131169/2137962-3 2132508/2132510 <i>Fax No. 2137964</i> E-mail No. crb@afsat.com
Ref. N	Jo:		Date :
Name	e of the .	Applicant:	
RE:	QUE	ESTIONNAIRE FOR PROFESSIONAL / TECH	INICAL REFERENCE
1) 2)		e fill in duplicate. Return the original and retain the co e use space overleaf if space provided for a give item i	
1)	(a) (b)	How long have you known the owners of this firm In what capacity?	n / company?
2)	date?	type of work has the qualified shareholder/partner o	
3)	(a)	What is the value of the largest single contract has has executed/supervised?	
	()	b) Has the qualified shareholder/partner supervised workmanship, materials and timely completion?	such contracts satisfactorily as regards
4)	Sharel	the firm / company have technically qualified and exp holder/partner ? Yes / No please give details.	perienced Personnel other than the qualified
	·····		
5)	 Does	the firm have serviceable Construction Plant and Eq	uipment? Yes / No.

	If so, give details:
6)	Do you consider that this firm / company may be trusted in EVERY PROJECT it is entrusted to
	execute?

Recommendation:

7)	The firm is capable to undertake contracts of values up to the limited of Class of Building / Civil / Electrical / Mechanical / Specialist ¹³ Contractors.
8)	Any other relevant information:

Full Name:	Profession:
	Professional Board ¹⁴
	Registration No
	Stamp
Status / Position	Professional Qualification(s)
Signature:	Postal Address
Date:	Physical Address:



P.O. Box 13374 **DAR ES SALAAM** Tel No. 2131169/2137962-3 2132508/2132510 *Fax No. 2137964* E-mail No. crbhq@crbtz.org

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FIVE	750	600	300	300	-	
SIX	300	200	150	150	-	
SEVEN	150	120	75	75	-	

Yours Sincerely,

recel -

RHOBEN NKORI REGISTRAR

13 State type of Contractor (Civil/ Mechanical /Building / Electrical or Specialist)



P.O. Box 13374 **DAR ES SALAAM** Tel No. 2131169/2137962-3 2132508/2132510 *Fax No. 2137964* E-mail No. crb@afsat.com

Ref. N	0:	Date :
Name	of the Ap	pplicant:
RE:	QUES	TIONNAIRE FOR PROFESSIONAL / TECHNICAL REFERENCE
1) 2)		fill in duplicate. Return the original and retain the copy for your record. use space overleaf if space provided for a give item in the questionnaire is not adequate.
1)	(a) (b)	How long have you known the owners of this firm / company? In what capacity?
2)	date?	ppe of work has the qualified shareholder/partner of the firm has executed/supervised to-
3)	(a)	What is the value of the single largest single has the qualified shareholder/partner of the firm executed/supervised?
	(c)	Has the qualified shareholder/partner supervised such contracts satisfactorily as regards workmanship, materials and timely completion?
4)	Shareho If so, p	e firm / company have technically qualified and experienced Personnel other than the qualified lder/partner ? Yes / No lease give details.
5)		ne firm have serviceable Construction Plant and Equipment? Yes / No.
6)	If so, g Do you execute	ve details: consider that this firm / company may be trusted in <u>EVERY PROJECT</u> it is entrusted to ?

Recommendation:

7)	The firm is capable to undertake contracts of values up to the limited of Class of Building / Civil / Electrical / Mechanical / Specialist ¹³ Contractors. Any other relevant information:	
8)		
Full Name:		Profession:
		Professional Board ¹⁴
		Registration No
		Stamp
Status	/ Position	Professional Qualification(s)
Signat	are:	Postal Address
Date:.		Physical Address: