

CONTRACTORS REGISTRATION BOARD

P.O. Box 96 **DODOMA**

Tel No. 026 2962403/4 E-mail: crbhq@crb.go.tz

CONTRACTORS REGISTRATION BOARD

THE CONTRACTORS REGISTRATION ACT, 1997 as amended

REVIEW INFORMATION

Made under Main Act 4(q)

SECTION I: COMPANY PROFILE

1.	Company's Name in full
2.	Address of Head Office:
3.	Contact Details:
	Telephone No Fax No
	E-mail:
4	Place (s) of Business i.e. Location of Main and Branch Offices (House/Plot No. Block No. Street and Village/Town/City)
5.	SHAREHOLDERS:
	Does shareholding changed since upgraded (Yes/No) tick whichever is appropriate and attach the latest extract from BRELA.
6.	TECHNICAL DIRECTOR:
	Submit: i) Certified copy of academic certificate
	ii) Updated CV
	iii) Recent taken coloured passport size photograph attested at the back by Advocate.
7.	PROFESSIONAL ENGINEER:
	Submit i) Certified Academic and Professional Certificate.
	ii) Updated CV
	iii) Current Employment Contract.

8. TECHNICAL PERSONNEL:

For each technical personnel submit:

- i) Certified Academic and Professional Certificate
- ii) Updated CV
- iii) Current Employment Contract

SECTION II. LIST OF PLANT AND EQUIPMENT

(Attach certified copies of Registration Licence and/ or any other documents as proof of ownership)

S/N	Type of Plant/Equipment	Make	Reg. Marks/ Number	Remarks

SECTION III: DECLARATION

- 12. I/We the undersigned hereby declare as follows:-
 - (i) My/our signing of this review 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 review.
 - (iii) The Board is welcome to visit and physically inspect my/our establishment, 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.
 - (iv) Failure to complete any part of the above requirements may result in being suspended/downgraded or deleted.

Dated	d this da	of20
(i)	Signed by	(Name in Block letters)
	in the capacity of	(status in Firm)
		Signature
(ii)	Signed by	(Name in Block letters)
	in the capacity of	(Status in Firm)
		Signature

SECTION IV

LIST OF ATTACHMENTS TO BE SUBMITTED

- 1. PROOF OF OWNERSHIP OF OFFICE (i.e. rent/lease agreement endorsed by advocate or certificate of occupancy if owned by one of shareholders/partners)
- 2. CV OF QUALIFIED SHAREHOLDER/PARTNER WITH CERTIFIED ACADEMIC/PROFESSIONAL CERTIFICATE
- 3. CV'S OF KEY PERSONNEL & CERTIFIED COPY OF ACADEMIC/PROFESSIONAL CERTIFICATE WITH RESPECTIVE **EMPLOYMENT CONTRACTS** FOR EACH STAFF.
- 4. CERTIFIED TRUE COPIES OF REGISTRATION CARDS/PROOF OF OWNERSHIP OF PLANT AND EQUIPMENT. *(should bear the name of firm or shareholder)*
- 5. UPDATED BRELA SERACH REPORT.

Note: Your attachments should follow the above order.