

Date:

To,
Dubai Development Authority
Zoning Division - Development Control
P.O Box 478844, Dubai - UAE
Tel: 800 – 4 – DDA (332)
Fax: 04 – 4272449

PROJECT NAME:

PLOT NO.:

LOCATION:

APPOINTMENT OF CONSULTANT/CONTRACTOR

We, _____ hereby declare that we have appointed _____
to carry out the construction of the above mentioned project.

OWNER DETAILS

NAME: _____

E-MAIL: _____

SIGNATURE: _____

MOBILE NO. _____

DATE: _____

STAMP

ACCEPTANCE BY CONSULTANT/CONTRACTOR

We hereby accept the appointment from owner/consultant and undertake that we will strictly abide by Statutory Authority requirements throughout the project.

Assuring our cooperation and services at all times

CONSULTANT DETAILS

CONTRACTOR DETAILS

COMPANY NAME: _____

COMPANY NAME: _____

AUTHORIZED NAME: _____

AUTHORIZED NAME: _____

DESIGNATION: _____

DESIGNATION: _____

MOBILE NO.: _____

MOBILE NO.: _____

E-MAIL: _____

E-MAIL: _____

DATE: _____

DATE: _____

AUTHORIZED SIGNATURE: _____

AUTHORIZED SIGNATURE: _____

STAMP

STAMP

Note: Attach valid Emirates ID (both sides) of the Authorized Person