

## CONSULTANT/CONTRACTOR REPLACEMENT APPLICATION

LATEST PERMIT NO. OR DESIGN APPROVAL NO.			
APPLICATION DETAILS (TICK APPROPRIATE BOX)	<input type="checkbox"/> Consultant Replacement <input type="checkbox"/> Contractor Replacement		
PREVIOUS CONSULTANT	I have no objection of this replacement Previous Consultant Name:	SIGNATURE AND STAMP	
NEW CONSULTANT	New Consultant Name:	SIGNATURE AND STAMP	
PREVIOUS CONTRACTOR	I have no objection of this replacement Previous Contractor Name:	SIGNATURE AND STAMP	
NEW CONTRACTOR	New Contractor Name:	SIGNATURE AND STAMP	
SUBMISSION DETAILS (TICK APPROPRIATE BOX)	<input type="checkbox"/> Initial Submission <input type="checkbox"/> Re-Submission		

### Notes:

- If the NOC from the previous Consultant is not available, undertaking Letter (Template No. "ZA-DC-T-109") to be signed by owner.
- If the NOC from the previous Building Contractor is not available, undertaking Letter (Template No. "ZA-DC-T-110") to be signed by owner and a report of site condition to be submitted.
- If the NOC from the previous Fit-out Contractor is not available, undertaking Letter (Template No. "ZA-DC-T-111") to be signed by owner and a report of site condition to be submitted.

### Terms and Conditions

- I hereby certify that the information, data and documents provided with this application are true, genuine and correct to the best of my knowledge. In case of default/failure to comply with any of the aforesaid conditions or the documents submitted by us is found false/forged, our application will be rejected forfeiting any applicable fees paid

OWNER DETAILS			
NAME		DATE & SIGNATURE	
MOBILE		STAMP	
EMAIL			