



ATTACHMENT 1

APPLICATION FOR CONTRACTOR WORK PASS

| NO. | / | DESCRIPTION | FOR OFFICE USE ONLY |
|--|---|--|---------------------|
| APPLICANT'S PROFILE (REQUIRED 1 COPY ONLY FOR EACH APPLICANT) | | | |
| 1 | | Application Form | |
| 2 | | 1 No. of Applicant's Passport Size Photo | |
| 3 | | Copy of Applicant's Identity Card | |
| 4 | | Copy of Applicant's Passport Employment Pass Validation | |
| 5 | | Copy of Work Permit | |
| 6 | | Return expired work pass issued by Department of Mechanical and Electrical Services | |
| 7 | | Copy of Education Certificate | |
| 8 | | Copy of Appointment Letter issued by company | |
| COMPANY'S PROFILE (REQUIRED 1 COPY ONLY FOR EACH COMPANY) | | | |
| 1 | | Copy of Valid Registration Certificate issued by Ministry of Development | |
| 2 | | Copy of Certificate Of Private Company Under Company Act Chapter 39 | |
| 3 | | Copy of Form X (The Company Act, Pursuant To Section 143) | |
| 4 | | Copy of Return Of Allotment Of Shares, Company Act Section 45 | |
| 5 | | Copy of Shareholder Certificate | |
| 6 | | Copy of Memorandum Of Articles Of Association | |
| 7 | | Copy of Business Name Act (Section 16) & Business Names Act Cap. 92 (Section 17) | |
| 8 | | Sample Signature of Company Owner / Director | |
| 9 | | Copy of Company Owner / Director's Identity Card / Passport | |
| 10 | | Copy of Valid and Latest Foreign Worker License (Section 112) for all foreign workers issued by Labour Department (where relevant) | |

For Office Use Only

- Form Filled Up Completely
- Form Filled Up Incompletely
- Incomplete Document Attached

| Remarks | Date and Department's Official Stamp |
|---------|--------------------------------------|
| | |

*Notes: The applicant is required to mark / in the box provided where any attached document is included with the application.

| *Work Category Details :- | |
|---------------------------|-------------------------------|
| 1 | M01 - Air Conditioning System |
| 2 | KPME02 - Lift and Escalator |

This form was issued by:
Development and Control Section (BKK)
Department of Mechanical and electrical Services (DME)
Public Works Department

Completed Form should be emailed to:
bkk.dme@pwd.gov.bn



REF NO: JKR/DME/BKK/CR/_____/20____

NEW APPLICATION

RENEW APPLICATION

UPGRADE APPLICATION

APPLICANTS' PICTURE

POSITION

ENGINEER TECHNICIAN TRADESMAN

WORK CATEGORY

M01 KPME02

A. APPLICANT'S PROFILE

NAME:

IDENTITY CARD : NUMBER COLOUR: EXPIRY DATE:

PASSPORT NUMBER: DATE OF ISSUE:

EXPIRY DATE: PLACE OF ISSUE:

DATE OF BIRTH: NATION OF ORIGIN:

EMPASS NUMBER: EMPASS EXPIRY DATE:

FOREIGN WORKER LICENSE : EXPIRY DATE EMPLOYER REFERENCE:

HIGHEST QUALIFICATION :

DATE ACQUIRED:

COURSE:

GRADE:

B. WORKING EXPERIENCE

| COMPANY NAME | ADDRESS/COUNTRY | POSITION | FROM | UNTIL |
|--------------|-----------------|----------|------|-------|
| | | | | |
| | | | | |
| | | | | |

C. COMPANY'S PROFILE

COMPANY NAME:

MOD REGISTRATION NUMBER: CLASS:

REGISTERED CATEGORY:

FROM: UNTIL:

SPECIFIC CONDITION:

D. LIST OF OWNER

| OWNER NAME | PERCENTAGE OWNED | IDENTITY CARD NUMBER | COLOUR |
|------------|------------------|----------------------|--------|
| | | | |
| | | | |
| | | | |
| | | | |

POST ADDRESS: OFFICE ADDRESS:

FOCAL PERSON:

TELEPHONE NUMBER: FAX NUMBER:

I hereby affirm that all information provided on this form is true

| |
|--|
| Applicant's Signature |
| |
| Name: <input style="width: 95%; height: 15px;" type="text"/> |
| Date: <input style="width: 95%; height: 15px;" type="text"/> |

| | |
|--|--|
| Company's Owner Signature | |
| <i>Chop (company)</i> | |
| Name: <input style="width: 95%; height: 15px;" type="text"/> | |
| Date: <input style="width: 95%; height: 15px;" type="text"/> | |