

[Type the document title]



ENVIRONMENTAL MANAGEMENT AGENCY

REGISTRATION FOR EIA CONSULTANCY FORM

[To be completed by the applicant in duplicate]

I. DETAILS OF APPLICANT

FULL NAME OF APPLICANT: _____

COMPANY NAME: _____

PHYSICAL ADDRESS OF APPLICANT: _____

II. DETAILS OF PROJECT: -

CERTIFICATE OF INCORPORATION NUMBER: _____

TAX CLEARANCE CERTIFICATE NUMBER: _____

PROFILE OF EIA STUDIES UNDERTAKEN TO DATE:

YEAR	TITLE OF EIA STUDY
_____	_____
_____	_____

DETAILS OF EIA TEAM MEMBERS (CV's and copies of certificates attached)

NAME	QUALIFICATION
_____	_____
_____	_____
_____	_____
_____	_____

III. DECLARATION BY APPLICANT

Irepresentingdo hereby declare that the above information is accurate. I further declare that the company does not employ and will not engage employee/s of the Agency in the execution of EIA studies.

Signature..... Date.....

IV. APPLICATION APPROVED/REJECTED

DATE..... CERTIFICATE NUMBER.....

SIGNATURE.....

For DIRECTOR GENERAL – ENVIRONMENTAL MANAGEMENT AGENCY