

CONSULTING ENGINEERS SOUTH AFRICA

DETAILS OF OFFICES ***WITHIN*** THE REPUBLIC OF SOUTH AFRICA:

(Complete a **separate sheet** for each office)

HEAD OFFICE

ONLY OFFICE

BRANCH OFFICE

SUBSIDIARY
COMPANY

(TICK APPLICABLE BOX)

NAME OF FIRM:

PHYSICAL ADDRESS:

Building:

Street:

Suburb:

Code:

City/Town:

Province:

Local Municipality:

District/Metropolitan
Council

The area within which the office is situated must be accurately specified to facilitate entry in the Geographic Listing of the Directory of Firms

POSTAL ADDRESS:

Code:

TELEPHONE NO:

Code:

Number:

FAX NO:

Code:

Number:

E-MAIL:

IF SUBSIDIARY COMPANY - STATE NAME OF HOLDING COMPANY

NAME (REGISTRATION AND QUALIFICATIONS, IF ANY) OF PERSON IN CHARGE OF OFFICE :

NAME:

REGISTRATION AND QUALIFICATIONS:

E-MAIL ADDRESS:

NOTE: Although all offices should be declared, only if there is a professionally registered (in the categories accepted by Council) person in fulltime superintendence will the office be listed in the Directory of Firms and the Website.

NAME OF PERSON RESPONSIBLE FOR HUMAN RESOURCES/TRAINING IN THE FIRM:

E-MAIL ADDRESS:

A. DETAILS OF ALL PRINCIPALS AND PROFESSIONAL STAFF AT THIS BRANCH ONLY

	1	2	3	4	5
SURNAME					
INITIALS					
KNOWN AS (eg "Bill for William")					
Professional Registration (if any) number and date (PrEng, PrTechEng, Quantity Surveyor, Architect, CA(SA) etc; full Membership of Institutions etc)					
Qualifications (Degrees/Diplomas)					
Field/s of Expertise					
Active Position in firm (Director/Member/Office Head) (**See Note Below)					
E-mail address					
Principal	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Young Professional	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
ID Number					
Cellphone number					

TOTAL OF ALL PRINCIPALS LISTED IN A ABOVE

(If insufficient space please supply an additional list)

NOTE: A FULL CURRICULUM VITAE IN RESPECT OF EACH PRINCIPAL MUST BE ATTACHED UNLESS ALREADY SUPPLIED TO THE ASSOCIATION

B. TOTAL STAFF AT THIS BRANCH ONLY

TOTAL OF ALL PROFESSIONAL STAFF INCLUDING PRINCIPALS LISTED IN A ABOVE	
TOTAL OF NON-PROFESSIONAL TECHNICAL AND CONTRACT STAFF (e.g. graduates, draughtsperson, laboratory assistants, etc)	
TOTAL OF OTHER STAFF AND CONTRACT STAFF (e.g. secretaries, bookkeepers etc)	
TOTAL OF ALL STAFF	

**** At least 50% of the company directors, partners, members of the close corporation for the firm as a whole must be professionally registered (in the categories accepted by Council) in accordance with Clause 2.1.6.**

A Principal of a Firm shall be any of the following who is in active practice in the firm: A sole practitioner, where the firm is a partnership, all the partners; where the Firm is a close corporation, all the members; where the Firm is a company, all the directors appointed in terms of the Companies Act or equivalent in the country of operation.