



REGISTRATION OF PROJECTS

PROJECT NAME AND LOCATION.	
PROJECT NAME	
PROJECT LOCATION.	
COUNTY	CONTITUENCY

**Give the name of the project as it appears in the contract documents.*

DEVELOPER(S)/ EMPLOYER (S)		
NAME(s)		
ADRESS		
TELEPHONE	Email Address:	

PROJECT CONSULTANTS			
	PROFESSION	NAME(S)	REGISTRATION NO
1	ARCHITECT		
2	ENGINEER (Civil/Structural)		
3	ENGINEER (Mechanical)		
4	ENGINEER (Electrical)		
5	QUANTITY SURVEYOR		
6	OTHERS (Specify)		

PROJECT CONTRACTORS				
		NAME(S)	NCA CATEGORY	NCA REG NO
1	MAIN CONTRACTOR			
2	CIVIL CONTRACTOR			
3	ELECTRICAL CONTRACTOR			
4	MECHANICAL CONTRACTOR			
5	OTHERS (Specify)			

PROJECT TYPE	
<input type="checkbox"/> ROAD WORKS	<input type="checkbox"/> ELECTRICAL ENGINEERING SERVICES
<input type="checkbox"/> WATER WORKS	<input type="checkbox"/> MECHANICAL ENGINEERING SERVICES
<input type="checkbox"/> BUILDING WORKS	
<input type="checkbox"/> OTHERS (Specify)	

**Please tick the applicable class of works.*

CLIENT CATEGORY	
<input type="checkbox"/> NATIONAL GOVERNMENT	<input type="checkbox"/> PARASTATAL/GOVERNMENT AGENCY
<input type="checkbox"/> COUNTY GOVERNMENT	<input type="checkbox"/> NGO/SOCIAL ORGANIZATION/CHURCH
<input type="checkbox"/> PRIVATE	<input type="checkbox"/> CDF
<input type="checkbox"/> OTHERS (Specify)	

**Please tick the applicable class of works.*

PROJECT COST AND DURATION	
1	CONTRACT SUM:
2	COMMENCEMENT DATE:
3	CONTRACT PERIOD:

**Attach copies of signed contract showing the project value and parties to the contract, signed form of tender and BOQ summary page*

