



DEVELOPMENT
CONTROL FORMS

SITE SERVICES INFORMATION REQUEST

DATE

Project Name: _____

Project Owner: _____ Plot No: _____

Consultant: _____

Contractor: _____

REQUIRED INFORMATION AND SUBMITTALS:

- ✓ Copy of stamped Affection Plan

WE NEED THE FOLLOWING SITE SERVICE INFORMATION.

☐ Road Profiles ☐ Electrical ☐ Water ☐ Sewage
☐ Telecom ☐ _____ ☐ _____ ☐ _____

CONTRACTOR

Name _____
Contact No. _____
Email _____

STAMP

Signature & Date

CONSULTANT

Name _____
Contact No. _____
Email _____

STAMP

Signature & Date

FOR OFFICIAL USE ONLY

TN- File: ☐ DLC ☐ RC ☐ AC ☐ EC ☐ GC ☐ MP ☐ DGC

Received By

Signature

Date

Remarks

- ✓ This information is issued for design purpose only.
- ✓ This information is issued for information only.
- ✓ Refer to the attached drawings for the existing road profiles, cross sections, electrical, water, sewage & telecom entry points and other services at the vicinity of the plot which are to be protected.
- ✓ Other Service Authority NOC's to be obtained.

Reviewed By
Snr. Engineer - Civil

Approved By
VP – Development Control

Date :