

Form No

DRP-001

**REPUBLIC OF THE UNION OF MYANMAR****Yangon Regional Government**

Yangon City Development Committee

Engineering Department (Building)

**DECLARATION OF RESPONSABILITY OF THE CERTIFIED PROFESSIONAL**

(One per certified professional)

**1. Application Number (to be filled by YCDC)****2. Site**

Address: \_\_\_\_\_ Ward: \_\_\_\_\_  
 Township: \_\_\_\_\_ Postal code: \_\_\_\_\_  
 Site area in acre: \_\_\_\_\_ Block No: \_\_\_\_\_ Lot No: \_\_\_\_\_

**3. Area of expertise of the certified professional**

- |   |  |
|---|--|
| <input type="checkbox"/> Architectural design                         | <input type="checkbox"/> VAC Infrastructure design (if needed) |
| <input type="checkbox"/> Structural design (Superstructure)           | <input type="checkbox"/> Water supply and sanitation design    |
| <input type="checkbox"/> Structural design (Substructure)             | <input type="checkbox"/> Deep excavation system design         |
| <input type="checkbox"/> Electrical design                            | <input type="checkbox"/> Construction                          |
| <input type="checkbox"/> Mechanical Infrastructure design (if needed) |  |
| <input type="checkbox"/> Other: _____                                 |  |

**4. Contact information**

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 Ward: \_\_\_\_\_ Postal code: \_\_\_\_\_ Township: \_\_\_\_\_  
 Phone No: \_\_\_\_\_ Email: \_\_\_\_\_ @ \_\_\_\_\_

Registration number:

Date

Signature

**5. Declaration and signature**

I hereby declare being fully aware of my rights and duties regarding the preset application to the building / demolition permit concerning the project mentioned in the application form attached to this declaration.

I hereby declare that i'm contracted by the Applicant - Land owner for the following mission:

- (a) Partial Mission (until the issuance of the Building or demolition Permit)  
 (b) Complete Mission (including the supervision during the works)  
 (c) In replacement of a previous certified professional regarding a partial mission.  
 (d) In replacement of a previous certified professional regarding a complete mission.

I hereby declare that if for any reason I should cease to provide general review for any reason during the construction or demolition, I will notified YCDC in writing immediately with a Notice of Responsibility Transfer (NRT-001), and another authorized certified professional will be appointed by the owner so that general review continues without interruption.

I confirm that, to the best of my/our knowledge, any facts stated in the application documents are true and accurate and any opinions given are the genuine opinions of the person(s) giving them. I understand that any false or misleading information may result in some additional delays regarding the issuance of the building / demolition permit.

Name of the Certified Professional

Signature

Date