



TOWN PLANNERS REGISTRATION BOARD
P.O. Box 77496, DAR ES SALAAM.
Tel: +255 22 2127976, +255 753 504 222,
Fax: +255 22 2112582, Website: http/tprb.go.tz



APPLICATION FOR REGISTRATION

(Made under regulation 4(1))

INDIVIDUAL REGISTRATION (LOCAL)

PART A

1. Personal information:

Family Name First Name Other Names
.....

2. Current Postal Address: .....

Telephone No: ..... Email: ..... Fax:.....

3. TIN No: .....

4. Referees (must be registered by town planners):

Name (1): ..... Signature: ..... Tel. No.....
Name (2): ..... Signature: ..... Tel. No.....

5. Academic professional qualifications: .....

6. Experience in Town Planning and related activities:

.....
.....
.....
.....

7. Have you ever been de-registered with Town Planners Registration Board in the past? Yes/No

If yes, why were you de-registered? .....
Previous registration number .....

**PART B  
DECLARATION BY APPLICANT**

I hereby declare that the particulars given above are correct and true to the best of my knowledge and belief.

.....  
Name of the Applicant

.....  
Signature

.....  
Date

**PART C  
FOR OFFICIAL USE**

Application Reference No: .....

Application Fee Receipt No: .....

Approved/Not Approved .....

Remarks: .....

.....

.....

Registration No: .....

Officer: .....

Signature: .....

Date: .....