



TOWN PLANNERS REGISTRATION BOARD
P.O. Box 77496, DAR ES SALAAM.
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Fax: +255 22 2112582, Website: <http://tprb.go.tz>



APPLICATION FOR REGISTRATION

(Made under regulation 4(1))

FIRM REGISTRATION (LOCAL)

PART A

1. **Firm's Name:**
2. **Current Postal Address:**
Telephone No: Email: Fax:.....
3. **TIN No:**
4. **Certificate of Incorporation (attach certified copy)**
Number: Date:
Business license (attach certified copy)
Number: date and place.....
5. **Ownership of shares**
Total No:
No. owned by registered town planners
6. **Names of registered town planners:**
Name (1): Registration number:
Name (2): Registration number:

7. Particulars of share holders/Directors

Name	Position	Academic professional qualifications	Experience in Town Planning and related activities

8. Referees (Must be registered by town planners):

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

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

**PART B
DECLARATION BY APPLICANT**

I hereby declare that 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: