

## CONSTRUCTION INDUSTRY DEVELOPMENT AUTHORITY, SRI LANKA

### INSTRUCTIONS FOR REGISTRATION AS AN ADJUDICATOR

- 1 Please send your duly completed application form and all accompanying documents to the following address:  
**Director General**  
**CONSTRUCTION INDUSTRY DEVELOPMENT AUTHORITY**  
**"Savsiripaya"**  
**123, Wijerama Mawatha**  
**Colombo 07**  
**SRI LANKA**
- 2 Application shall be accompanied by a report consisting of not less than two thousand words demonstrating knowledge and skills.
- 3 The copies of Certificates submitted must be authenticated by a Notary Public or an Attorney at Law
- 4 Please note that non submission of required supporting documents may cause delays in processing.
- 5 For speedy processing and integrating your information into the Register, please submit also a digital copy of the application in Microsoft Word format in advance by e-mail or by uploading to the Web.
- 6 Processing of your application will take approximately 4 weeks from the date of receipt of the duly completed application. You will be informed if any additional information is required after preliminary screening.
- 7 Application, if found not be in order, will be rejected and the applicant will be informed accordingly.
- 8 The processing fee Rs. 3,000. 00 is non refundable and, if selected, the annual registration fee of Rs. 20,000. 00 shall be paid.
- 9 Applications are received throughout the year. However evaluations are carried out quarterly subject to the maximum 04 times per year.
- 10 Names of selected Adjudicators will be listed under the CIDA registered Adjudicators, once the Registration fee of the current year is paid.
- 11 Once issued the registration shall be renewed annually before 31<sup>st</sup> of January each year, irrespective of the date of enrolment.

for official use	
Application No:	

<b>CONSTRUCTION INDUSTRY DEVELOPMENT AUTHORITY, SRI LANKA</b>
<b>APPLICATION FOR REGISTRATION AS ADJUDICATOR</b>

**Instructions:**  
 1. Applicants are requested to read carefully the attached "Notes to Applicants" before filling up this form  
 2. Please use block letters

<b>A : DISCIPLINE, CATEGORY , AREA OF SPECIALITY</b>	
* <b>Discipline</b>	
<input type="checkbox"/> Engineering	<input type="checkbox"/> Architecture
<input type="checkbox"/> Quantity Surveying	
* <b>Sub discipline in Engineering:</b>	
<input type="checkbox"/> Civil	<input type="checkbox"/> Electrical
<input type="checkbox"/> Mechanical	<input type="checkbox"/> Building Services
<input type="checkbox"/> Other (specify)	<input style="width: 150px; height: 20px;" type="text"/>

<b>PART A. APPLICANT'S INFORMATION</b>
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<b>A-1: PERSONAL DETAILS</b>																	
<b>1</b>	Name with Initials											<b>Gender</b>	Male	Female			
<b>2</b>	Name in Full																
<b>3</b>	Nationality					<b>Date of Birth</b>		D D M M Y Y Y Y				Recent Photo of the Applicant size 35mm X 45mm					
		<b>Number</b>		<b>Passport</b>		<b>National Identity Card</b>											
<b>4</b>	Expiry Date of Passport																
		<b>Country of Issue</b>				<b>Date of Issue</b>				D D M M Y Y Y Y					D D M M Y Y Y Y		
<b>5</b>	Profession																
<b>6</b>	Permanent Address																
<b>7</b>	Contact Address																
<b>8</b>	Tel : (Office)					<b>Mobile</b>											
	Tel : (Home)					<b>Fax No</b>											
	e-mail:																



**PART B. APPLICANT'S PROFESSIONAL EXPERIENCE**

**B-1: RECORD OF TEN (10) YEARS RELEVANT EXPERIENCE AFTER OBTAINING CORPORATE MEMBERSHIP**

(Please use additional A4 size sheets if necessary)

12	Period <i>(from - to)</i>	Position Held	Details of the Employer & Project	Responsibilities:	*Area of Speciality

\*Please specify the number of relevant area of speciality as defined below.

Planning	<input type="checkbox"/> i	Investigations	<input type="checkbox"/> ii	Design	<input type="checkbox"/> iii	Preparation of Contract Documents	<input type="checkbox"/> iv
Procurement	<input type="checkbox"/> v	Supervision	<input type="checkbox"/> vi	Implementation	<input type="checkbox"/> vii	Management of Construction works	<input type="checkbox"/> viii

DETAILS OF REPORT (eg. Name of Report, Number of words)	
13	1
	2
	3
	4
	5
	6
	7
	8
	9
	10

**PART D: UNDERTAKING TO BE SIGNED BY THE APPLICANT**

14	<p>I, <b>being a Citizen of Sri Lanka</b>, hereby apply for Registration as an Adjudicator to be engaged in the Adjudication defined under Section 51 &amp; 52 of the CONSTRUCTION INDUSTRY DEVELOPMENT Act No. 33 of 2014 .</p>	
	<p>I will also accept as final and binding, any decisions made by the Construction Industry Development Authority, Sri Lanka.</p>	
	<p>If I am granted registration, I shall abide by the laws and regulations of the Democratic Socialist Republic of Sri Lanka.</p>	
	<p>I declare that I do not have any involvement or interest that is considered to be in real or apparent conflict with the duties to be performed in the duties concerned. I affirm that all information given above are true and accurate.</p>	
	<p>Name:</p>	<p>Date:</p>
	<p>Signature of Applicant</p>	

**RECOMMENDATION ON THE APPLICATION** *(For office use only)*

Name of Applicant	Address	Application No:
NIC No		
Passport No		Validity Period

**Checklist (Tick boxes to confirm)**

**Comments by CIDA**

- |   |   |
|---|---|
| <p>a) <input type="checkbox"/> Application Fee paid.</p> <p>b) <input type="checkbox"/> Certified copies of Degree Certificate/s attached.</p> <p>c) <input type="checkbox"/> Certified copies of Certificate/s for Professional Practice attached.</p> <p>d) <input type="checkbox"/> Applicant is a <u>current member of the Professional Body concerned.</u></p> <p>e) <input type="checkbox"/> Applicant's Curriculum Vitae attached.</p> <p>f) <input type="checkbox"/> Applicant's record of experience after obtaining Corporate membership.</p> <p>g) <input type="checkbox"/> Application is satisfactory.</p> | <p>a) <input type="checkbox"/> Academic Qualifications</p> <p>b) <input type="checkbox"/> Professional Qualifications</p> <p>c) <input type="checkbox"/> Experience with Corporate membership</p> <p>d) <input type="checkbox"/> Report</p> |
|---|---|

**Recommendation**

(Tick boxes to confirm)

- Professional Qualifications
- Corporate membership
- Experience with Corporate Membership
- Report

**Field of Speciality;**

CIDA hereby  Recommends  Does not recommend this Applicant for registration as an Adjudicator.

.....  
Authorized Signature 1  
Name :  
Designation :  
Date :

.....  
Authorized Signature 2  
Name :  
Designation :  
Date :

.....  
Authorized Signature 3  
Name :  
Designation :  
Date :

**Remarks (if any):**