

## Certificate of Proof Check Consultant for Architectural Design

Letter No. ....

Dated:.....

To,

For ..... (Name of the Developer)

Address: .....

Tel.No.: .....

**Ref:**

Sr. No.	Details	
1.	Building ID	
2.	Sub Enclave Name	
3.	Enclave Name	

.....(Name of the Proof Check Consultant Architect) bearing C.A Registration no.....is appointed as Proof Check Consultant for Concept and Architectural Design Review by.....(Name of the Developer) for the above mentioned building.

With respect to the Concept and Architectural Design that are prepared by ..... (Name of the Architect) appointed by ..... (Name of the Developer), we certify the said design and drawings are in general conformity with GIFT Area Development Control Regulations, National Building Code and all other relevant codes and standards.

Signature: \_\_\_\_\_

Date: .....

Name: ..... (Name of the Proof Check Consultant Architect)

Address:.....

Ph. No.:.....