

SURAT URBAN DEVELOPMENT AUTHORITY

**Architect Registration form for AutoDCR**

**(Building Plan Approval System)**

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| --- | --- |
| \*Name |  |
| Firm Name |  |
| \* Registration Number  (provided by Council of Architects) |  |
| \* Valid Up to Date |  |

|  |  |
| --- | --- |
| \*Email ID (Please enter valid  email ID) |  |
| \*Mobile Number |  |
| Phone Number |  |
| \*Address |  |

\* Items Mandatory

**Note: Please attach registration Certificate provided by Council of Architects.**