Certificate of Undertaking of Accredited Architect

То

The Competent Authority

For (Name of the Developer)

Ref:

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

Address:	
Tel.No.:	
I am a member of Council of Architects and I am possessing current \boldsymbol{r}	registration to act as accredited Architect.
I hereby certify that I am appointed as the Accredited Architect required under the provisions of the GIFT Zone Development Control and that I have prepared and signed the same and that the execution direction and supervision of supervisor or owner, as per the appropriate provisions of the GIFT Area Development Control Regulations, we responsibilities under the same and I undertake to fulfill them in all natural calamities.	ol Regulations for the above mentioned project on of the project shall be carried out under my oved drawings. I am fully conversant with the which are in force, and about my duties and
I also undertake to provide my guidance for the adequate measure plumbing, drainage, sanitation and water supply. The appointment contractor, plumbing contractor and electrical contractor shall be before the relevant work commences.	nt of site supervisor, clerk of works, building
	Signature:
	Reg. No
	Date:
Name:Name of the Architect	Signature of Developer:
Address:	
Tel.No:	