

APPLICATION FOR REGISTRATION/RENEWAL AS AN EIA/REVIEW CONSULTANT

(Regulation 39)

When completing this application please ensure that all sections are completed and that all requested information is provided.

Official Use Only

Registration No.

Fee Payable: \$

Section 1 Tick consultant category applied for -

Principal Consultant Technical Assistant Assistant Consultant Review Consultant

Section 2 Personal Information

Family name:	Given Name:	
Prefix/Title:		
Address:		
Telephone:	Mobile:	Fax:
E-mail:		

Section 3

Details of any company or partnership of which the consultant is a member or employee

Company or firm name and address

Position in company or firm

Section 4 Qualifications

List professional qualifications as an environment consultant.

If none, set out details of experience in environmental consultancy work in the category applied for.

Section 5 Previous Application

No Previous application for registration as a consultant

Previous application -

As a principal consultant	Date	Result
As a technical assistant	Date	Result
As a assistant consultant	Date	Result
As a review consultant	Date	Result

Section 6 Declaration

I hereby apply for registration/renewal of registration as -

Principal consultant

Technical assistant

Assistant consultant

Review consultant

for purposes of the Environmental Management (EIA) Regulations.

I agree to the publication of my name (and the company name and contact details) in the environmental register.

I confirm that the information given in this application is true and complete to the best of my/our knowledge and belief.

I have not been convicted of any criminal offence in any country, other than motoring or minor offence resulting in a fine of less than \$xxx. (or provide details)

I have read and agree to comply with the EIA Consultants Code of Conduct and I will not reproduce the contents of any EIA report prepared by me as a consultant except with the permission of the client and the Department of Environment.

I understand that the giving of false answers in this application may provide grounds for the withdrawal of registration as a consultant.

I have no objection to the Department making copies of this form available to other governmental or intergovernmental organisations.

Signed

Witnessed

Date

Company name (if any)

3 copies of this form duly completed must be sent to -

The Director

Department of Environment

P.O.Box 2109

Government Buildings, Suva