



MINISTRY OF HOUSING & CONSTRUCTION

APPLICATION for **REGISTRATION, GRADING AND MONITORING OF CONSTRUCTION CONTRACTORS**

MAIN CONSTRUCTION CONTRACTORS



Construction Industry Development Authority
“Savsiripaya”
123, Wijerama Mawatha
Colombo 07.
Tel : 2699801, 2695965

Publication No. : **CIDA/ID/09(E)**
Revised Edition : **March 2016**
Price : **Rs. 400/=**

FOR CIDA OFFICE USE ONLY

CIDA No. :			
Registered Name of Contractor:			
<u>Records of Work Done during last 05 years</u>			
YEAR	TURN OVER OF THAT YEAR (Rs. Million)	TODAY'S VALUE (Rs. Million)	ANY OTHER REMARKS
TOTAL TURN OVER (Rs. Million)			

From the Previous File {

New Records {

DETAILS ON LARGEST JOB COMPLETED	OTHER DETAILS
PREVIOUS RECORDS	Finance : Cash :
	Others
	Prof. Staff :
	Tech. Staff
CURRENT RECORDS (on Largest job)	
	Machinery & Equipment
	Others

OTHER DETAILS & CALCULATIONS

FOR CIDA OFFICE USE ONLY

Documents to be checked at the Receipt of Application – by the Information Officer

Contractor CIDA No Ref No Date

No application (New, Renewal or Upgrading) should be accepted if the Business Registration is not submitted.

All the missing documents should be submitted before the application is processed and finalized. If not the application will be rejected.

Details	Documents in file	Remarks
1. Details of Business Registration. a. Individual proprietor/partnership - Copies Business registration	<input type="checkbox"/> YES <input type="checkbox"/> NO	.....
b. Limited liability company - <u>Form 01/form 40</u> - for • Registered Name of the Company • Registered Address • Names of Directors • Share distribution (for foreign collaboration) - <u>Form 20</u> - for • Information on change of Directors.	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO	....................
2. Bank letters	<input type="checkbox"/> YES <input type="checkbox"/> NO	.....
3. Signed affidavit in the application (Date/Place/Rs. 50/- Stamps)	<input type="checkbox"/> YES <input type="checkbox"/> NO	.....
4. For grades C6 and above - Copies of audited statements	<input type="checkbox"/> YES <input type="checkbox"/> NO	.....
5. C forms with <u>names highlighted</u>	<input type="checkbox"/> YES <input type="checkbox"/> NO	.....
6. Plant list with GA/Chartered Mechanical engineer’s approval (optional for C3 & above)	<input type="checkbox"/> YES <input type="checkbox"/> NO	.....
7. Records of work done with tags fixed to identify the work - Largest project in different specialties - Last 5 years	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO	..........
8. Availability of NCASL Membership	<input type="checkbox"/> YES <input type="checkbox"/> NO	.....
9. Have you furnished information requested by Department of Census & Statistics for the annual census (please submit reply from Dept. of Census as evidence)	<input type="checkbox"/> YES <input type="checkbox"/> NO	.....

Checked by..... Date

(Information Officer)

Agreed by the Contractor - Name

Signature

APPLICATION FOR REGISTRATION, GRADING AND MONITORING AS A MAIN CONSTRUCTION CONTRACTOR

INSTRUCTIONS:

1. The applicants are strongly advised to consult the Guidelines for Registration and Grading (CIDA/ID/10-M) before filling this form. They are also free to consult “Information Centre” of CIDA for further clarifications.
2. The sections A, B, C, D, E and F of this Application Form should be duly perfected and forwarded to the “Information Centre” of CIDA directly.
3. In the event where an item does not apply to the applicant, “Not Applicable” should be inserted against the item concerned.
4. This duly perfected application should be submitted with all the necessary supporting documents, which **should be numbered in a sequence**. Further, the supporting documents must be properly compiled as a series of enclosures each of which must be labeled according to relevant paragraph of this application form. **The photocopies submitted must be authenticated by a Notary public or by an Attorney at Law.**
5. **The affidavit given in Annex (II) of the application should be completed confirming that what has been submitted is true and correct to the knowledge of the contractor.**
6. If any irregularities are observed in the photocopies of the supporting documents submitted, such copies will be checked with the originals. In this event the originals must be produced.
7. At the submission of the application a preliminary screening will be done to ensure that the contractor possesses the basic requirements for registration.
8. Deliberate submission of false documentation will result in the rejection of the application. Preliminary investigations will be carried out for such cases & necessary action will be taken as per the Annex 3 of Guideline for Registration, Grading and Monitoring of Construction Contractors (CIDA/ID/10-M). No further applications from such contractors will be accepted until whatever action that has been initiated subsequent to such reporting has been concluded.
9. The Contractors Record Book (when obtained to the first time) will be issued only to the **owner**.

A minimum of two weeks period will be taken to process an application.

Mark (✓) in the appropriate box applied for

New Registration

Additional Registration

Upgrading of Registration

Renewal of Registration

A6	NAMES AND QULIFICATIONS OF PARTNERS / DIRECTORS (Other than the names given under permanent staff)			SELF EVALUATION	MARKS BY CIDA
	Name	• National Identity Card Number	Qualification		
	Managing Director/CEO				
	Other Directors				
1					
2					
3					

- Attach photo copies of National Identity Cards.

A7	FIELDS OF REGISTRATION AND GRADES APPLIED FOR MAIN CONSTRUCTION CONTRACTORS					
	Field	Existing Grade	Expected Grade	Field	Existing Grade	Expected Grade
	Building	<input type="text"/>	<input type="text"/>	Highways	<input type="text"/>	<input type="text"/>
	Bridge	<input type="text"/>	<input type="text"/>	Water Supply & Sewerage	<input type="text"/>	<input type="text"/>
	Irrigation & Drainage Canals	<input type="text"/>	<input type="text"/>	Dredging & Reclamation	<input type="text"/>	<input type="text"/>
	Storm Water Disposal and Land Drainage	<input type="text"/>	<input type="text"/>	Maritime Construction	<input type="text"/>	<input type="text"/>
	Heavy Construction (Areas to be specified)	<input type="text"/>	<input type="text"/>			

A8	IF ANY OF THE OWNER / PARTNERS/DIRECTORS HAVE INTEREST IN OTHER CONTRACTING ORGANIZATIONS FURNISH THE FOLLOWING DETAILS			
	Name of the person	Organization	CIDA Reg. No.	Interest
1				
2				

SECTION B - FINANCIAL RESOURCES

FINANCIAL FACILITIES FROM BANKS OR OTHER INSTITUTIONS (approved by the Central Bank)		
Facility	Value	Name of the Institution
Permanent Overdraft		
Fixed Deposits		
Wealth Certificates		
Current Accounts		
Saving Accounts		

SELF EVALUATION	MARKS BY CIDA

EXTRACTS FROM THE FINANCIAL STATEMENTS FOR LAST 3 YEARS			
	20.....	20.....	20.....
Turnover from construction			
Fixed assets (FA)			
Current Assets (CA)			
Current Liabilities (CL)			
Long term liabilities (LL)			
Working Capital (CA-CL)			
Net Worth (CA+FA-CL-LL)			

SELF EVALUATION	MARKS BY CIDA

- Attach audited annual Financial Statements for last three years.
- For a new organization, wealth and income of Partners/Sole Proprietor need to be submitted in a separate sheet.

SECTION C- PERSONNEL RESOURCES

C 1 PROFESSIONAL STAFF – Regular / In-house Staff Only

Documents to be attached:

1. Evidence of Employment (Give details of EPF paid – copies of “C” Forms six months previous & Central Bank payment records)
2. Copies of Educational, and Professional Certificates
3. Documents to prove relevant experience
4. Curriculum Vitae in a format as shown in Annexure I (Reproduce if necessary)

NAME	FIELD OF SPECIALITY	NIC NUMBER	MEMBERS EPF NO.	PROFESSIONAL QULIFICATIONS AND MEMBERSHIP NUMBER	SELF EVALUATION	MARKS BY CIDA
a. Chartered Engineer with 15 years Experience						
1.
2.
3.
b. Chartered Architect with 15 years Experience						
1.
2.
c. Chartered Quantity Surveyor with 15 years Experience						
1.
2.
d. Chartered Engineer with 10 years Experience						
1.
2.
e. Chartered Architect with 10 years Experience						
1.
2.

NAME	FIELD OF SPECIALITY	NIC NUMBER	MEMBERS EPF NO.	PROFESSIONAL QULIFICATIONS AND MEMBERSHIP NUMBER	SELF EVALUATION	MARKS BY CIDA
f. Chartered Quantity Surveyor with 10 years Experience 1. 2.
g. Chartered Engineer 1. 2.
h. Chartered Architect 1. 2.
i. Chartered Quantity Surveyor 1. 2.
j. Departmentally Qualified Engineer 1. 2.
k. Graduate Engineer or equivalent with 6 years experience 1. 2.
l. Incorporated Engineer with 10 years experience 1. 2.
m. Graduate Engineer or equivalent 1. 2.

NAME	FIELD OF SPECIALITY	NIC NUMBER	MEMBERS EPF NO.	PROFESSIONAL QULIFICATIONS AND MEMBERSHIP NUMBER	SELF EVALUATION	MARKS BY CIDA
n. Architect						
1.
2.
o. Graduate Quantity Surveyor						
1.
2.
p. Incorporated Engineer						
1.
2.
q. Engineer (Vocationally Qualified)						
1.
2.
r. Assistant Engineer						
1.
2.
s. Architectural Licentiate						
1.
2.
t. Assistant Quantity Surveyor						
1.
2.

Note : In the case of C6 & C7 Contractors the details of the consultant should be filled under the relevant category. The Documentation needed to be submitted are a binding consultancy agreement [Annex (III)] with a letter of consent from the Consultant [Annex (IV)]

C 2 SUPERVISORY STAFF – Regular / In-house Staff Only

Documents to be attached:

1. Evidence of Employment (Give details of EPF paid – copies of “C” Forms six months previous & Central Bank payment Records)
2. Copies of Educational, and Professional Certificates
3. Documents to prove relevant experience
4. Curriculum Vitae in a format as shown in Annexure I (Reproduce if necessary)

NAME	NIC NUMBER	MEMBERS EPF NO.	TECHNICAL QULIFICATIONS	SELF EVALUATION	MARKS BY CIDA
a. Engineering Assistant					
1.
2.
3.
b. Technical Assistant					
1.
2.
3.
c. Quantity Surveying Assistant					
1.
2.
3.
d. Foreman					
1.
2.
3.
e. Supervisor					
1.
2.
3.
f. Construction Craftsman / NVQ Level 3					
1.
2.

SECTION D – EXPERIENCE AS A MAIN CONSTRUCTION CONTRACTOR

The Contractor should submit Documentary evidence to support his experience as a Construction Contractor.

The Documents to be attached are the copies of the relevant pages of the CIDA record book (certified by the Consultant) with necessary entries for the completion of work backed by:

1. Completion certificates issued by qualified consultants.
2. Completion certificates issued by state sector clients (In the case of private clients, certificate issued by the Consultant for the particular project and the final payment certificate certified by the qualified consultant should also be attached).
3. Agreements related to the project

D 1 - ORGANISATIONAL EXPERIENCE

FIELD OF SPECIALITY	NO. OF YEARS OF EXPERIENCE	SELF EVALUATION	MARKS BY CIDA

D2 - CONSTRUCTION WORK PERFORMED DURING LAST 5 YEARS

YEAR (In the descending order)	TURNOVER (Construction only)	SELF EVALUATION	MARKS BY CIDA
Year 1 (.....)			
Year 2 (.....)			
Year 3 (.....)			
Year 4 (.....)			
Year 5 (.....)			
TOTAL			

D3 - THE LARGEST CONSTRUCTION CONTRACT COMPLETED DURING LAST FIVE YEARS

FIELD OF SPECIALTY	FINAL CONTRACT VALUE	YEAR COMPLETED	PROJECT, LOCATION & CLIENT	SELF EVALUATION	MARKS BY CIDA

D4 - WORK IN HAND – (Attach documentary evidence)

CLIENT	DESCRIPTION OF CONTRACT	CONTRACT AMOUNT

SECTION E – OTHER INFORMATION

E 1 - OTHER STAFF (ADMINISTRATIVE AND MANAGEMENT)

Regular / In-house staff only

Documents to be attached:

1. Evidence of Employment (attach details of EPF paid – Copies of “C” Forms for six months & Central Bank payment records)
2. Educational & Professional Certificates.
3. Curriculum Vitae in a format as given in Annex (I)

NAME	PROFESSIONAL QAULIFICATIONS	NO OF YEARS OF EXPERIENCE	SELF EVALUATION	MARKS BY CIDA

E 2 - TRADE TESTED EMPLOYEES

No of employees:

Documents to be attached:

1. Copies of trade tested certificates
2. Proof for employment

SELF EVALUATION	MARKS BY CIDA

E 3 - DOES THE COMPANY POSSESS A VALID SYSTEM MANAGEMENT CERTIFICATION

(attach the copy/copies of the valid System Management Certificates)

			SELF EVALUATION	MARKS BY CIDA
ISO 9000	YES	NO		
ISO 14000	YES	NO		
OHSAS 18000	YES	NO		

E 4 - DETAILS OF CONSTRUCTION EXCELLENCE AWARD /MERIT CERTIFICATE /NCASL AWARD OBTAINED DURING LAST FIVE YEARS? (Attach relevant certificates)

PROJECT	TYPE OF AWARD & THE AWARDED ORGANIZATION	YEAR OF AWARD	SELF EVALUATION	MARKS BY CIDA

E 5 - DETAILS OF WORKSHOPS, SHORT COURSES, SEMINARS & OTHER TRAINING PROGRAMMES ATTENDED TO GAIN CCD POINTS – (Attach details, certificates or any other available information)

NAME OF THE COURSE	PERSON/S ATTENDED (FULL TIME STAFF ONLY)	COURSE		SELF EVALUATION	MARKS BY CIDA
		DATE	DURATION		

E 6 - DETAILS OF CONSTRUCTION SAFETY & OCCUPATIONAL HEALTH PERSONNEL ENGAGED

NAME	NIC NO.	EPF NO.	QUALIFICATION	SELF EVALUATION	MARKS BY CIDA
CONSTRUCTION SAFETY & OCCUPATIONAL HEALTH MANAGER					
▪		
▪		
CONSTRUCTION SAFETY & OCCUPATIONAL HEALTH OFFICER					
▪		
▪		
CONSTRUCTION SAFETY & OCCUPATIONAL HEALTH SUPERVISOR					
▪		
▪		

E 9 - DETAILS OF CSR ACTIVITIES

PROJECT NAME	SUMMARISED DESCRIPTION OF WORK	MAGNITUDE	YEAR OF COMPLETION	SELF EVALUA-TION	MARKS BY CIDA

I / We hereby certify that the information provided in this application including annexes and supporting documents are true and accurate as at this date. I /We am / are aware in the event that any information given is found to be incorrect or that relevant information is with-held, my/our application will be automatically disqualified in addition to any further action Institute for Construction Industry Development Authority (CIDA) may decide to take.

Signature :

Name of authorized person :

Designation / Title :

Date of application :

CURRICULUM VITAE OF KEY PERSONNEL

This form should be reproduced as necessary so that particulars of each of the staff members referred to in sub sections C1 & E1 of the application form is set out in a fresh form.

PERSONAL PARTICULARS

NAME	
ADDRESS	

DEGREES, DIPLOMAS, PROFESSIONAL QULIFICATIONS AND TRADE CERTIFICATES

AWARDING INSTITUTIONS	QULIFICATIONS	YEAR

Please indicate any other programmes /courses which the member has attended and which are relevant to his/her appointment.

RECORD OF EXPERIENCE

PERIOD		APPOINTMENT & BRIEF DESCRIPTION OF DUTIES	NAME OF EMPLOYER
FORM	TO		

(Sample format of the Affidavit to be used by the contractor)

AFFIDAVIT

I
of being a Buddhist /
Christian / Hindu / do hereby solemnly sincerely and truly declare and swear / affirm as
follows :

- 1) I am the deponent above named.
- 2) I state that the information, documents and statements submitted by me attached to my application to the CIDA for grading and registration of Contractors are true and correct.
- 3) I state that if any one of those information, documents and claims furnished by is found to be incorrect will result in rejection of my application for registration and grading of Contractors.
- 4) I also state that I am subject to the control of the disciplinary code of CIDA for the Construction Contractors.
- 5) I indemnify the CIDA from any Criminal of Civil Liability whatsoever arising out of or in-relation to my registration as a Construction Contractor.

The foregoing contents were read over and explained to the deponent by me and having understood same affirm/swear to and placed his/her signature in my presence at

.....
Signature on Rs.50/- Stamp
deponent before me

Justice of the peace

(Sample format of the Agreement between the Contractor & Consultant)

DRAFT AGREEMENT FOR CONSULTANCY SERVICE

BETWEEN

.....(Contractor)

AND

.....Consultant)

THIS AGREEMENT is made and entered into this day of
20.....between, on the one hand,
.....(hereinafter called
the contractor) and on the other hand
.....(hereinafter called the consultant)

WHEREAS

- (A) The contractor needs the services, on a part time basis, of the consultant, to provide professional and technical support in the preparation of tenders for construction contracts, carrying out contract administration and management and supervision of works for a period of three years from the date hereof, and

WHEREAS

- (B) The consultant has agreed to provide the above mentioned services.

NOW THEREFORE the parties hereto agree as follows :

1. The consultant shall attend to the services listed in paragraph (A) herein above as required and in a manner so that the contractor’s works are proceeded smoothly and without interruption during a period of three years from the date hereof.
2. In consideration of the consultant providing the services listed herein above the contractor agrees to pay the consultant at the monthly rate of Rs.

INWITNESS WHEREOF the parties hereto have hereunto set their hands on the day and year just above written.

Sig :

CONTRACTOR

Sig. :

CONSULTANT

In the presence of :

Witness 1.

Witness 1.

Witness 2.

Witness 2.

NOTARIAL ATTESTATION

INotary Public of

hereby attest that the parties to this Agreement and the Witnesses set their hands hereto in my presence at

..... thisday of20.....

NOTARY PUBLIC
(Seal)

(Sample Letter to be submitted by Consultant)

.....
.....
.....
.....

Director (Development)
CIDA.

PROVISION OF CONSULTANCY SERVICES TO

This is to inform you that I have agreed to provide my services to
..... as per the per performance agreement signed
between
&
and attached to this application for Registration & Grading. I also certify that my services in a similar
capacity are utilized at the moment by,

- 1.
- 2.
- 3.
- 4.

Thank you,
Yours faithfully,

.....