



## WORK PERMIT REQUEST



Please complete this application and submit A: General Information	it with required attachmen	ts to DUBAI SOUTH Regula	atory Affairs / Land	Planning & Development Control Dept	
Tenant / Project Owner:					
Consultant / Interior Designer:			Contractor:		
Building / Facility / Plot No.:	Suito	Suite / Floor No.:			
		Suite			
Work to commence on site:	From :	/ /	То:	/ /	
B: Required Information and Submittals Consultant/ interior designer Appointment		♦ NOC from	DS- LIIM for Distric	t Cooling ( if Applicable)	
<ul> <li>Consultant/ interior designer Appointment Letter from tenant(Original)</li> <li>Consultant/ interior designer Acceptance Letter (Original)</li> <li>Copy of Consultant/ interior designer Trade License &amp; DS Reg.</li> <li>Contractor Appointment Letter from tenant (Original)</li> <li>Contractor Acceptance Letter (Original)</li> <li>Contractor Acceptance Letter (Original)</li> <li>Copy of Contractor Trade License &amp; DS Reg.</li> <li>NOC from DS- QHSSE department.</li> <li>NOC from DS-UIM for Sewerage and Drainage( if Applicable)</li> </ul>		<ul> <li>NOC from DS- UIM for Electrical ( if Applicable)</li> <li>NOC from Elisalat for Telecommunications( if Applicable)</li> <li>NOC from Civil Defense ( if Applicable)</li> <li>NOC from Civil Aviation ( if Applicable)</li> <li>NOC from DS Security ( if Applicable)</li> <li>Design Drawings (2 Hardcopy sets + 1. Soft copy( CAD &amp; PDF).</li> <li>Demarcation Certificate ( if Applicable)</li> </ul>			
C: Fee					
Submission Fee: AED 2,500/-					
Received By:	Receipt No.:		Signature	:	
Refundable Deposit : AED 50,000/-					
Received By:	Receipt No.:		Signature:		
*A Knowledge fee of AED 10 applies to each transaction.			Total:*		
D: Submission Details					
Submission Details :	ial Submission	Resu	bmission		
CONTRACTOR			CONSULTANT		
Name		Name			
Contact No.		Contact No.			
Signature & Date	STAMP	Sign	ature & Date	STAMP	
E: For Official use only					
Document Receiving:		т	RN-		
Dessived By	Ciar			Data	
Received By	Signature		Date		
Remarks:					
Approved	Approved Conditional Appr		val Resubmit		
Name, Signature & Date					
Reviewed By			Approved	-	
Zoning Engineer			VP – Land Planning & Development Date Issued :		