



**APPLICATION
 FOR CONSTRUCTION**

Note: Incomplete forms will not be accepted

RESORT INFORMATION	Your Ref No:	Date:
Registered Name of the Resort:		
Name of the Island:.....Atoll:		

TYPE OF DEVELOPMENT	(Please tick (✓) where appropriate)		
New development	<input type="checkbox"/>	Additional structures (s)	<input type="checkbox"/>
Conceptual changes	<input type="checkbox"/>	Demolition	<input type="checkbox"/>
Total renovation/upgrading	<input type="checkbox"/>	Others please specify:
Partial renovation/upgradin	<input type="checkbox"/>

BED CAPACITY		STAFF	Foreign	Local
Registered Bed Capacity	<input type="text"/>	No. of Staff (present):	<input type="text"/>	<input type="text"/>
Bed Capacity at the end of project	<input type="text"/>	No. of Staff at the end of project	<input type="text"/>	<input type="text"/>

Note: Can the existing infrastructure (retaurant, staff accommodation, staff, power generation capacity, and deasalination plant capacity, etc..) cater for the increase in bed capacity

Y	N
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PRIMARY LEASE HOLDER'S INFORMATION
Name:
Address:
Tel: Facsimile: Email:
Contact person: Designation: Mobile:

OPERATOR'S INFORMATION
Name:
Address:
Tel: Facsimile: Email:
Contact person: Designation: Mobile:

CAPITAL INVESTMENT

Proposed capital investment for the project in US\$:

Total original capital investment in US\$: (for redevelopment/upgrading or refurbishment projects only)

Investor Name/Company:

Investor's nationality/registered country:

**Please attach a brief summary of breakdown of the proposed capital investment*

DURATION OF THE PROJECT

Proposed commencement date for Construction (dd/mmm/yy)*:

Proposed date to complete the project:

Proposed date to commence operation:

**Please allow 30 days to process your application*

STRUCTURES PROPOSED FOR CONSTRUCTION/DEMOLITION/ALTERATION

- 1. 8.
- 2. 9.
- 3. 10.
- 4. 11.
- 5. 12.
- 6. 13.
- 7. 14.

Comments:

Note: Please attach additional pages if necessary

AUTHORIZATION

Please authorize the above additional construction/demolition/altering/upgrading to be carried out in our resort. I/we will take the utmost care in preserving and protecting the natural environment of the island during construction/upgrading. I/we commit to complete the above work (s) as per the drawings upon approval and in accordance with the rules and regulations of the Ministry of Tourism Arts & Culture and other Government organizations.

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Name and Signature of the Primary Lease Holder

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.....

Name and Signature of the Operator

Note: If the lease holder/operator is a company, please affix your company stamp

Note:

1. The application should be duly filled and submitted along with the following documents.
 - a. Approved site plan 2 copies
 - b. Approved digital site plan (AutoCAD and PDF format) 1 copy
 - c. Detailed drawings
 - d. Soft copy of detailed drawings (AutoCAD format) 2 copies
 - e. Demolition plan (if required) 2 copies
 - f. Bill of quantities (if required) (soft copy - excel) 1 copy
 - g. Table of Contents of the Detailed drawings layout submitted with Registered Structural Engineers Stamp 1 copy

Approvals

Work plan approval date with reference letter no.	
Land survey approved date with reference letter no.	
Concept approval date with reference no.	
EIA approval date and reference no.	

Received by:

Name:..... Designation:.....

Date:..... Signature:.....

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