



Application Form for Change of Consultant / Contractor (Modification Section)

Submission Type

New

Resubmission (Previous Submission Reference No):

Application Information

Client

Name	<input type="text"/>		
E-Mail	<input type="text"/>	Telephone	<input type="text"/>
Trakhees ID	<input type="text"/>	Trade License # (Companies)	<input type="text"/>

Consultant (if applicable)

Name	<input type="text"/>		
E-Mail	<input type="text"/>		
Trakhees ID	<input type="text"/>	License No.	<input type="text"/>

Contractor (if applicable)

Name	<input type="text"/>		
E-Mail	<input type="text"/>		
Trakhees ID	<input type="text"/>	License No.	<input type="text"/>

Location Details

Business Unit	<input type="text"/>	Location	<input type="text"/>
Plot Number	<input type="text"/>		
Building No.	<input type="text"/>	Unit No.	<input type="text"/>



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Party to be changed:		Reason for change request:	
<input type="checkbox"/> Consultant	<input type="checkbox"/> Contractor	<input type="checkbox"/> Normal	<input type="checkbox"/> Dispute

Required Documents for submission :

Termination of the current: Consultant Contractor

This is to inform you that we have terminated M/S _____,
as our Consultant/Contractor for the project.

Appointment of New: Consultant Contractor

This is to inform you that we have appointed M/S _____,
as our Consultant/Contractor for the project.

We hereby authorize the Consultant/Contractor to obtain all necessary authority approvals. Also, this is to inform you that I agree to all submitted designs.

Undertaking by Client:

We hereby confirm that we accept to take full responsibility in regards to completion of the above mentioned Project by appointing the aforesaid Party, and we are responsible for any Legal obligations which may occur with the involved parties due to this change.

Client	Signature/Stamp



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Confirmation of Competence :

This is to confirm that our trade license number, as per current practise, issued from Dubai Emirate, permits the activities that covers all the assigned works and we have the required Accreditation cards as per relevant Accreditation [Circular Ref. CEDGR – 44 dated 10 May 2017](#), if applicable for this project.

Consultant	Stamp	Contractor	Stamp

Undertaking by New Consultant:

We hereby confirm that we accept to take full responsibility in regards to completion of the abovementioned Project by maintaining the Safety and the Integrity requirements in terms of; but not limited to the following conditions:

- 1) We confirm that the approved drawings/documents and specifications prepared by the previous Consultant have been received, checked and verified and found satisfactorily/adequate to complete the remaining works without compromising the safety and durability requirements.
- 2) To ensure that the work on site is proceeding as per the latest approved documents/drawings and all revisions have been considered in the construction process.
- 3) To ensure that all construction documents have been fully coordinated and to resolve whatsoever conflict/defect that may be detected. CED-Trakhees shall be notified of any serious concern which may be observed in the drawings or the constructed works. Accordingly, we undertake to obtain CED approval for any revision/rectification that may be required.
- 4) To undertake full responsibility of any correctness measures, and shall propose/approve the proper solution for design/construction problems in compliance with project documents/relevant standards/engineering code of practice.

Consultant	Stamp



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Undertaking by New Contractor:

We hereby confirm that we accept to take full responsibility in regards to completion of the abovementioned Project by maintaining the Safety and the Integrity requirements in terms of; but not limited to the following conditions:

- 1) To ensure that the work on site is proceeding as per the latest approved documents/drawings and all revisions have been considered in the construction process.
- 2) To ensure that all construction documents have been fully coordinated and to resolve whatsoever conflict/defect that may be detected. CED-Trakhees shall be notified of any serious concern which may be observed in the drawings or the constructed works. Accordingly, we undertake to obtain CED approval for any revision/rectification that may be required.
- 3) To undertake full responsibility of any correctness measures, and shall propose/approve the proper solution for design/construction problems in compliance with project documents/relevant standards/engineering code of practice.

Contractor	Stamp

Undertaking by New Consultant regarding (CAR) Contractor All Risk Insurance:

(if applicable)

We hereby confirm the sole responsibility/liability to ensure that the relevant insurance CAR policy as per below details is complying with the Executive Council Resolution No. (28) Of 2022 / DM circular/Trakhees Subcircular requirements and must be valid and the revalidated during the project construction progress as per the relevant scope of work.

CAR policy details:

- Plot number: _____
- Scope of works: _____
- Contractor All Risk Insurance (CAR) Policy No. _____
- Contractor All Risk Insurance (CAR) Policy Period: _____

Consultant	Stamp



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Percentage of Construction Progress

You are hereby advised to fill in the percentage of the work in progress.

Type of Work	% of Work
Mobilization	
Excavation	
Soil Improvement	
Partitions & Ceiling Works	
Foundation (Substructure)	
Columns	

Type of Work	% of Work
Slabs	
Block Works	
Cladding Works	
Finishing Works	
Landscaping	
Others (Specify)	

Other Work (Please specify):

The following tables list documents that need to be submitted along with the application. All documents should be submitted in PDF format. Identify documents that are submitted by selecting against each document. Documents should be submitted online organized into folders as identified by folder code against each document title. Following is the folder code and folder name.

(GD) General Documents

For New Submission / Re-Submission:
(For CONSULTANTS only)

	Folder Code	Yes	N/A
COC Form for Modification Works	(GD)	<input type="checkbox"/>	<input type="checkbox"/>



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**For New Submission / Re-Submission:
(For CONTRACTORS only):**

	Folder Code	Yes	N/A
Valid Contractor All Risk Insurance CAR with policy No., issued date and expiry date complying with the Executive Council Resolution No. (28) Of 2022 / DM circular/Trakhees circular requirements, concerning that the insurance policy is required for the licensing of the construction works in the Emirate of Dubai.	(GD)	<input type="checkbox"/>	<input type="checkbox"/>
COC Form for Modification Works	(GD)	<input type="checkbox"/>	<input type="checkbox"/>

Declaration

- We hereby confirm that all data provided in this application / documents comply with Trakhees' Regulations & Standards.
- If any delay occurs due to incorrect information provided by us in the submitted application, we hold ourselves solely responsible for the delay.
- We are liable for any legal obligations that may occur due to invalid / tampered documents being submitted along with this application.

Client	Signature / Stamp	Consultant	Signature / Stamp	Contractor	Signature / Stamp

Submitter's Details

Name		Mobile Number	
ID Type		ID Number	