

**CERTIFICATE OF AUTHORIZATION APPLICATION FORM – ARTIFICIAL WATER PLAN
(ANNEX 15)**

The general form and the relevant annex (s) must be completed, and the required documents must be attached to the forms

Identification of Contractor

Tick if the owner is performing the work

Company name: _____

Name of person
responsible: _____

Address: _____

Telephone number: _____

Others: _____

Email: _____

Project information

Description: _____

Documents required

- Implementation sketch
- Layout sketches

Applicant's signature

Date