

# GSAS SERVICE PROVIDER LICENSE

## Design & Build

(Application Form)



### Service Provider & CGP Information

Org. Name:

Address:

Country:

Tel:

Fax:

Email:

Website:

CGP Name:

GSAS ID:

### GSAS Service Provider Types & Fees (Please tick to select the relevant types)

#### Compulsory:

<input type="checkbox"/>	License Fees for Type I: Building Typologies	<input type="text"/>
	Commercial, Offices, Residential, Education, Mosques, Hospitality, Homes, Light Industry, Parks, Interiors, Renovations	

#### Optional\*:

<input type="checkbox"/>	License Fees for Type II: Districts	<input type="text"/>
<input type="checkbox"/>	License Fees for Type III: Energy Centers	<input type="text"/>
<input type="checkbox"/>	License Fees for Type IV: Healthcare Scheme	<input type="text"/>
<input type="checkbox"/>	License Fees for Type V: Railways Scheme	<input type="text"/>
<input type="checkbox"/>	License Fees for Type VI: Sports Scheme	<input type="text"/>

Total Amount QR / US\$:

Note\*: Optional types if acquired separately, expiry date of the compulsory type will be applied.

# GSAS SERVICE PROVIDER LICENSE

## Design & Build

(Application Form)



### FOR SERVICE PROVIDER ACKNOWLEDGEMENT

**Disclaimer:**

I acknowledge that I have read and understood the following on GORD’s website and I agree to abide by the policy and standards set forth within:

GSAS Technical Guide 2019	
GSAS Technical Clarifications	
All GSAS Policy updates (Including Ref:2/2019 – Demerit System for Quality Assurance)	

I am attaching a copy of the nominated CGP’s QID or Labor Regulating Authority certificate indicating employment with the GSAS Service Provider.	
--	--

<b>Name of the Service Provider:</b>		
<b>Service Provider Representative (CGP):</b>		
<b>Signature &amp; Stamp:</b>	<b>Date:</b>	

<p><b>REQUIREMENTS:</b></p> <ol style="list-style-type: none"> <li>1. Valid company commercial license</li> <li>2. Valid one GSAS-CGP certificant</li> <li>3. GSAS-CGP certificant must be legally affiliated with Service Provider</li> <li>4. Valid Energy Assessment Workshop certificate</li> </ol>	<p><b>REGISTRATION:</b></p> <ol style="list-style-type: none"> <li>1. Please complete &amp; submit this application form</li> <li>2. Request for invoice prior to making any payment</li> <li>3. Membership will be activated upon receipt of full payment</li> <li>4. Paid amount is non-refundable in any case and for any reason</li> </ol>	<p><b>BENEFITS:</b></p> <ul style="list-style-type: none"> <li>• One Year membership</li> <li>• Access to electronic GSAS Publications relevant to license type</li> <li>• Listed on <a href="http://www.gord.qa">www.gord.qa</a> <ul style="list-style-type: none"> <li>• Logo Placement</li> <li>• 100 Words (write-up)</li> </ul> </li> <li>• Access to GSASgate</li> <li>• Priority in registration for events/ workshops/ CPDs</li> </ul>
---	--	--