



STATUS OF APPLICA	<b>ANT</b> (tick wh	<u>nichever is applica</u>	<u>able)</u>			
Sole Proprietorshi	p	Partner	ship / AOP		Compan	<b>y</b> Private
Limited Liability C	ompany	Others	Please specify:			
FIRM DETAILS						
Firm Name:						
Head Office Located (Mention the name of the Co	ountry/City):			Year of Es	tablishment:	
Name of Proprietor/C	EO/Lead Par	tner:				
Complete Address:						
Business Telephone	No.:		Busine	ss Email:		
Registered With Authority:					Reg. No. Valid Upto: (Attach Copy)	
LOCAL OFFICE REP	RESENTATIO	ON (PAKISTAN)				
<b>Local Office Located</b> (Mention the name of the Cit	ty):			Year of Es	tablishment:	
Name of Local Repres	entative:					
Local Telephone No.	+92		Email:			
FBR (DNFBP) Registr (For Pakistan-Based Compa			Va	lid Upto:		(Attached Photo Copy)





## **WORK EXPERIENCE**

	Experience							
Sr. No.	Nature of Work	Duration of Project	Value of Project in USD	Name of the Client	Name of the Project			
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								



Note: Any change in particulars please be intimated to the Authority.



Signature

### **REGISTRATION FORM FOR AUTHORIZED OVERSEAS SALES PARTNER**

### **DETAILS OF ALL CO-OWNERS / PARTNERS / DIRECTORS**

Brief Information o	f the Proprietor/Le	ad Partner/Chie	<u>ef Executive:</u>	
Name:			S/O, D/O, W/O:	
Residential Address:				
Designation:		Joining Date:		Picture
CNIC/NICOP/POC/Pass	sport No:			i ictare
Business No.		Mobile No.		
Email Address:				
Note: Any change in par		atea to the Author	1	Signature
Name:			S/O, D/O, W/O:	
Residential Address:  Designation:  CNIC/NICOP/POC/Pass	port No:	Joining Date:		Picture
Business No.		Mobile No.		
Email Address:				



Note: Any change in particulars please be intimated to the Authority.



Signature

### **REGISTRATION FORM FOR AUTHORIZED OVERSEAS SALES PARTNER**

## (<u>Use copy of this page incase of more)</u>

Name:			S/O, D/O, W/O:	
Residential Address:				
Designation:		Joining Date:		Picture
CNIC/NICOP/POC/Pas	sport No:			ricture
Business No.		Mobile No.		
Email Address:				
Co-Owners / Partn	ers / Director:		7	
	ers / Director:		S/O, D/O, W/O:	
Name:	ers / Director:		S/O, D/O, W/O:	
Name: Residential Address:	ers / Director:	Joining Date:	S/O, D/O, W/O:	Picture
Name:  Residential Address:  Designation:		Joining Date:	S/O, D/O, W/O:	Picture
Name:  Residential Address:  Designation:  CNIC/NICOP/POC/Pas		Joining Date:	S/O, D/O, W/O:	Picture
Co-Owners / Partn  Name:  Residential Address:  Designation:  CNIC/NICOP/POC/Pas  Business No.  Email Address:			S/O, D/O, W/O:	Picture





### **PAYMENT PROCEDURE**

	Allied Bank Limited (Islamic)
Title of Accou	nt: Punjab Central Business District Development Authority
	Account No: 0020087137770021
	IBAN: PK96ABPA0020087137770021

### **DOCUMENTS REQUIRED FOR REGISTRATION**

	Application Form for Registration (Particulars of Applicant)
	Company Profile
	Letter of Interest from the company to PCBDDA, explaining the potential contribution and justifying the reason to be selected as an Authorized Overseas Sales Partner
	Number of Projects developed/sold in the last 05 years. (Provide Client Name, Project Worth, Location of the Project, Nature of the Project, Duration of the Projects Completed and/or In Progress)
	Number of offices in other locations/countries with the Legal Status and Registration Documents, Authorization Document/License to Work in the relevant country(s) (local and international)
	Photocopies of CNIC/NICOP/POC/Passport for each Owners/Partners/Directors
	01 x colored photograph (01" x 01") of each Owner/Partner/Director
	Proof of payment for the Processing Fee of <b>PKR 25,000/-</b> or its equivalent in local currency (Non-Refundable), in favor of " <i>Punjab Central Business District Development Authority</i> "
П	Duly signed and stamped undertaking





## **UNDERTAKING**

l, Mr	S/O		
bearing CNIC/NICOP/POC/Passport No		, being Sole	Proprietor/Lead Partner/CEO
of			
resident ofin possession of my full faculties and senses solemnly affirm and declared:			
• I will only charge a commission on the contract.	ne sale/purchase of un	nits mentioned	I by the Authority as per the
<ul> <li>I will abide by all rules and regulations is</li> <li>I will abide by the instructions/SOP giver</li> <li>I will not work against the interest of PCE</li> </ul>	n by Punjab Central Bu		
<ul> <li>In case of any dispute/query arises applied</li> </ul>		will be implem	ented.
<ul> <li>PCBDDA has the right to Accept/Reject/of me any reason at any time. I will not go t</li> </ul>	Cancel my application	for Registratio	n / Renewal without assigning
• I completely understand that Myself, r employees.	ny Partner's / Directo	r's and my em	nployees are not Government
• I hereby declare and assure that Myself a any fraudulent activity, defaulter, ar			
Department / Agency / Autonomous bod	-		
<ul> <li>In case of myself, my Partners/ Director financial corruption, registration should</li> </ul>			nd in any fraudulent activity /
<ul> <li>I also understand that it is my respons</li> <li>Form, if any to PCBDDA, as and when occ</li> </ul>	ibility to intimate cha		rovided details in Application
			Deponent
	VERIFICATION		
Verified on Oath at LAHORE this	day of	20	that the contents of this
undertaking are true and correct to the be therein.			