

APPLICATION FOR REGISTRATION AS **PROFESSIONAL LAND SURVEYOR**

in terms of  
THE PROFESSIONAL LAND SURVEYORS' AND TECHNICAL SURVEYORS' ACT, 1984

**APART FROM LODGING THE FORM "C" AND FORM "G"  
THE FOLLOWING INFORMATION MUST PLEASE ALSO BE FURNISHED  
AND PAYMENT OF REGISTRATION AND ANNUAL FEES INCLUDED**

SURNAME ..... DATE OF BIRTH. ....

FIRST NAMES .....

QUALIFICATIONS .....

NATURE OF EMPLOYMENT .....  
(in private practice or company employed, state, municipality, education, etc.)

NAME OF EMPLOYER .....

BUSINESS ADDRESS ..... PREFERRED POSTAL ADDRESS .....  
(the physical address where applicant is employed:- not the post box)  
.....  
.....  
.....  
.....

BUSINESS TELEPHONE NUMBER .....

FAX NUMBER .....

E-MAIL ADDRESS .....

CELL NUMBER .....

OPTIONAL INFORMATION REQUIRED FOR STATISTICAL PURPOSES:

ETHNIC GROUP ..... GENDER .....



For current fee pricing see **COUNCIL FEES** letter. Both registration and annual fees listed below have to be paid.  
**Registration fees** for Professional Land Surveyors ..... see **Council Fees Code 01**

- Annual fees** from one of the employment types listed below.
- Prof Land Surveyors in Private Practice or so employed ..... see **Council Fees Code 07**
  - Prof Land Surveyors employed elsewhere ..... see **Council Fees Code 08**
  - Prof Land Surveyors employed in Foreign Countries ..... see **Council Fees Code 11**
  - Prof Land Surveyors employed in SA Development Countries (other than SA) ...see **Council Fees Code 12**

All fees on COUNCIL FEES letter are 14% VAT inclusive. (Fees for Foreign and SADC do not include VAT)

**NB. For the period 1 October to 31 March the Annual Fee will be halved.**

This application must be returned to  
THE REGISTRAR  
P O BOX 83018  
SOUTH HILLS  
2136

**APPLICATION FOR REGISTRATION AS A PROFESSIONAL LAND SURVEYOR**

**IN TERMS OF SECTIONS 20(2), (4) OR 21(2) OF**

**THE PROFESSIONAL LAND SURVEYORS' AND TECHNICAL SURVEYORS' ACT, 1984**

**(ACT 40 OF 1984)**

The Registrar,  
The South African Council for Professional and Technical Surveyors

I, the undersigned (full names).....

of (address).....

.....  
hereby apply for registration as a Professional Land Surveyor.

I swear/make affirmation• and declare that the contents of this application are true and further:

- (a) that I am the person mentioned in the letter signed by the Registrar and on the certified copies of qualifications which I wish to be entered in the Register, which are hereby submitted in support of my application;
- (b) that I am not according to the law detained as a mentally ill person;
- (c) that I have/have never• been convicted of an offence and sentenced in respect thereof to imprisonment without the option of a fine;
- (d) that I have/have never• been removed from an office of trust on account of improper conduct;
- (e) that I am not disqualified for registration in terms of this Act or, before the commencement of this Act, was so disqualified in terms of any other law governing the registration of land surveyors;
- (f) that I am/am not• insolvent, that I have/have not• assigned my estate for the benefit of my creditors and that I have/have not• compounded with my creditors.

PLACE	DATE	SIGNATURE
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I certify that before the deponent made the oath/affirmation• I asked him/her• the following questions and wrote down his/her• answers in his/her• presence:

- (i) Do you know and understand the contents of this declaration?  
Answer: .....
- (ii) Do you have any objection to taking the prescribed oath/making the prescribed affirmation•?  
Answer: .....
- (iii) Do you consider the prescribed oath/affirmation• to be binding on your conscience?  
Answer: .....

I certify that the deponent has acknowledged that he/she• knows and understands the contents of this declaration which was sworn to/affirmed• before me and the deponent's signature was placed thereon in my presence.

.....  
Commissioner of Oaths

Designation (Rank) .....

Date: ..... Place:.....

•Delete whichever is not applicable.

**OATH OR AFFIRMATION IN RELATION TO THE PRACTISING OF PROFESSION OR CALLING**

I, the undersigned (full name)

.....

do solemnly and sincerely swear/affirm• that I will discharge the duties of a

.....

carefully and without partiality, fear, favour or affection, and will conform to all regulations and rules defining those duties which are now in force, or shall hereafter be established by competent authority.

PLACE	DATE	SIGNATURE
-------	------	-----------

I certify that before the deponent made the oath/affirmation• I asked him/her• the following questions and wrote down the answers in his presence:

- (i) Do you know and understand the contents of this declaration?

Answer: .....

- (ii) Do you have any objection to taking the prescribed oath/making the prescribed affirmation•?

Answer: .....

- (iii) Do you consider the prescribed oath/affirmation• to be binding on your conscience?

Answer: .....

I certify that the deponent has acknowledged that he knows and understands the contents of this declaration which was sworn to/affirmed• before me and the deponent's signature was placed thereon in my presence.

.....  
Commissioner of Oaths.

Designation (Rank) .....

Date: .....

Place: .....

•Delete whichever is not applicable.



## SOUTH AFRICAN COUNCIL FOR PROFESSIONAL AND TECHNICAL SURVEYORS

Unit 4, Heritage Park  
Yellow Route  
Off Lower Germiston Road, Area 26  
ROSHERVILLE

P O Box 83018  
SOUTH HILLS  
2136

Tel : (011) 626-1040 / 1080  
Fax : (011) 626-2007  
e-mail : plato@icon.co.za

APPLICATION FOR REGISTRATION

AS A

***PROFESSIONAL LAND SURVEYOR***

**Banking Details.**

ABSA Bank -        Alberton Branch                    Current Account

Account Holder ; S A Council for Surveyors

Account Number : 210-168-583

Branch Code ; 631142

Please ensure that your name is clearly printed in the reference section on the deposit slip. Kindly attach a copy of your deposit slip with your application as well as faxing a copy to this office. Providing a correct reference number will enable us to accurately allocate the deposit to your account.