



ADAMAWA STATE OF NIGERIA

Adamawa State Urban Planning and Development Board

Application For Approval of Corporate Building Permission

ABP	ABP Number	(Fill in CAPITAL LETTERS and tick the appropriate items. DO NOT FOLD this form)	ADL	ADGIS FILE NUMBER
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Check the guideline for application processing fee and must be paid on Remitaor with Bank Transfer check the website for details.

BOX1 APPLICANT

All applicants must complete Box1 in full. All applicants must submit the original documents used to identify the organization; they will be copied and returned. The original identification document used to prove identity of the MD/CEO/Chairman must be submitted; it will be copied and returned.

Name of Organisation: _____			
Corporate Affairs Commission Number (CAC): _____		Date of Registration: ____/____/____	
TIN: _____	TPhone _____	Email: _____	
CEO/MD/Chairman Information			
Title: _____	First: _____	Middle: _____	Surname: _____
Designation: _____	Phone: _____	Email: _____	
Identification:	<input type="checkbox"/> International Passport	<input type="checkbox"/> Tax Identification Card	<input type="checkbox"/> National ID Card
	<input type="checkbox"/> Driver's License	<input type="checkbox"/> Voter Registration Card	<input type="checkbox"/> ID Number

BOX 2 ADDRESS

All applicants must complete Box2 in full. This should be your normal residential address.

House No: _____	Street Name: _____
_____	City/Town _____) State: _____
Country: _____	P.O./P.M.B _____ C/O: _____
Additional Address Information: _____	

BOX 3 REPRESENTATIVE

Applicants who wish to appoint a representative must complete Box3 in full. The original identification document used to prove the identity of the representative must be submitted; it will be copied and returned. Applicants Note: the representative is authorised to submit and receive information and documents pertaining to this application.

First: _____	Middle: _____	Surname: _____
Phone 1: _____	Phone 2: _____	Email: _____
Identification:	<input type="checkbox"/> International Passport	<input type="checkbox"/> National ID Card
	<input type="checkbox"/> Tax Identification Card	<input type="checkbox"/> Driver's License
		<input type="checkbox"/> Voter Registration Card
		ID Number _____

BOX 4 PLOT

Please fill in the below information of the plot that has been or will be developed.

Land Use: _____	Purpose: _____
District: _____	L.G.A: _____
Plot Description / Address: _____ _____	

BOX 5 REQUIRED DOCUMENTS

Applicants should submit all the relevant documents, with minimum requirement indicated below. If you have multiple relevant documents, please submit them and tick the documents that you acquire. Please note that any drawings should be endorsed by a relevant professional.

<input type="checkbox"/> Copy of the Digital Certificate of Occupancy (ADGIS)	<input type="checkbox"/> Site Analysis Report
<input type="checkbox"/> 2 Copies of Structural Drawings and Details	<input type="checkbox"/> Copy of AEPA's Environment Impact Assessment
<input type="checkbox"/> Copy of Structural Calculations	<input type="checkbox"/> Copy of ADGIS DLA Sketch Plan
<input type="checkbox"/> 2 Copies of Architectural Drawings and Details	<input type="checkbox"/> Soil Investigation Report
<input type="checkbox"/> 2 Copies of Mechanical/Electrical Drawings and Details	<input type="checkbox"/> Copy Of Service Approvals (Fire and Police Reports)

BOX 6 SIGNATURE

All applicants must affix their signature; the application will not be accepted without signature. In the case of a representative, they must also affix their signature.

Applicant Signature: _____	Representative Signature: _____
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FOR OFFICIAL USE ONLY

Application Date: ____/____/____

Application Fees: Application Processing Fee

Application Type: New Proposal Renovation As-Built Remodeling Regularization