

APPLICATION FOR COMMISSIONING								
To: The Director Greenbuildingindex Sdn Level 4, PAM Centre, 99 Jalan Tandok, Bangsar, 59100 Kuala Lumpur, Ma	РНОТО							
I intend to offer my GBICxS services to third parties.								
Yes								
No								
A. PERSONAL PARTICULARS (to be complete in BLOCK LETTERS)								
Full Name Ir /Mr /Mrs /Other [Please underline surname]		·						
Other Name								
Identity Card/ Passport No.		Place of Birth/ Nationality						
Date of Birth dd/mm/yyyy		Sex	M / F					
Below are the details of the firr	n through which I will be offe	ring my GBICxS serv	/ices:					
Company Name* (SSM no.)								
Other Registration Details, viz CIDB								
Company Address								
Tel., Fax & Email	Office no.*		Fax no.*					
	H/P no.*							
	Email address* (*Please tick the contact nun	 nber for uploading to w	ebsite www.areen	buildinaindex.ora)				



B.	Qualifications			
	(Name in BLOCK LETTERS)			
	hereby apply to be registered as a Competent GBI Commissioning Specialist and provide the following details for GBIAP approval as follows:			
	NOTE: Application must be submitted together with a registration fee of RM106.00			
	Competent GBI Commissioning Specialist Course:			
	Date of attendance of Competent GBI Commissioning Specialist Course:			
	Date of passing of Competent GBI Commissioning Specialist Course:			



CV	OF APPLICANT AND AFFILIATED COMMISSIONING FIRM		
Item	Individual Pre-Requisites	Please tick (√)	
	Confirmation letter from Affiliated Commissioning Company that applicant represents them		
	Applicant is a current TABB Certified Supervisor who has certified at least 5 buildings on M&E systems		
	OR		
	Applicant is a Professional Engineer registered with the Board of Engineers (BEM) Malaysia AND has at least 5 years Testing & Commissioning experience in building services		
	OR		
	Applicant is a Competent Electrical or Supervising Engineer registered with Suruhanjaya Tenaga		
3	Complete CV from applicant		
4	BEM Certificate of applicant		
5	Certificate of Completion GBI Facilitator Course		
6	Certificate of Completion Competent Commissioning Specialist Course		
Item	Affiliated Commissioning Company Pre-Requisites	Please tick (√)	
1	Registration with Suruhanjaya Syarikat Malaysia (SSM)		
2	Company Profile		
3	List of Testing Instruments		
	Company has current registration with NEBB or TABB and has certified at least 5 buildings on M&E systems (Please attached CV and BEM certificate of supporter)		
	OR		
- ()	Company has in employment at least 1 professional Mechanical Engineer registered with BEM with at least 5 years' experience in commissioning building services (Please attached CV and BEM certificate of supporter)		
, ,	At least 1 Professional Electrical/Electronic Engineer registered with BEM, each with at least 5 years' experience in commissioning building services (Please attached CV and BEM certificate of supporter)		
	OR		
	At least 1 Competent Supervising Engineer or Competent Electrical Engineer registered with Suruhanjaya Tenaga (Please attached CV and BEM certificate of supporter)		
	OR .		
	At least 2 High Tension Chargemen registered with Suruhanjaya Tenaga (Please attached CV and BEM certificate of supporter)		



D.	DECLARATION	I							
a) b) c) d) e) f) g) h) i)	I hereby apply to be registered as a Competent GBI Commissioning Specialist (CxS). I hereby declare that all the particulars and information given in this form and the appendices attached are true and accurate. I meet ALL criteria listed for the application. I have passed GBI Facilitator Course and Examination. I understand that the application will be disqualified if any information given is found to be untrue. I agree that GSB reserves the right to accept or reject the application for whatever reason. I give my consent for GSB to obtain and verify information from or with any source as GSB deem appropriate for the assessment of this application. I hereby agree to abide by the Code of Conduct of Competent GBI Commissioning Specialist.								
	Signature: Date:								
	о <u> </u>	PROPOSER		SECONDER					
		Signature		Signature					
		Name (in BLOCK LETTERS)		Name (in BLOCK LETTERS)					
		GBI CxS No		GBI CxS No					
		Date		Date					
	Note: Proposer and Seconder should be current GBI Commissioning Specialist								
FOR OFFICIAL USE									
	te received eceipt No								
	nount								
Date acceptable to the GBIAP									
Date of accreditation									
Competent GBICxS Registration No.									