## **TECHNICAL INFORMATION FORM**

Company Name					
Name of Competent Person <sup>1</sup>					
Qualification					
Discipline					
Years of Experience					
Professional Registration Status Of Competent Person	Professional Council (e.g. ECSA)				Registration Number
Contact Details of Competent Person	Tel				
	Fax				
	Cell				
	Email				
Professional Indemnity (PI)	Attached	Yes	No	Value of PI	
Preferred Provinces <sup>2</sup>	Province 1				
	Province 2				

## <sup>1</sup> = Professional registration status of competent person as defined in SANS 10400

<sup>2</sup> = Indicate your preferred provinces