



**AUTORITI KAWALAN BANGUNAN DAN INDUSTRI PEMBINAAN (ABCi)**  
**KEMENTERIAN PEMBANGUNAN, NEGARA BRUNEI DARUSSALAM**  
 AUTHORITY FOR BUILDING CONTROL AND CONSTRUCTION INDUSTRY (ABCi)  
 MINISTRY OF DEVELOPMENT, NEGARA BRUNEI DARUSSALAM

**SIJIL PENGIKTIRAFAN SYARIKAT/FIRMA UNTUK UJIAN JENTERA PENGANGKAT SELAMAT DIGUNAKAN**  
 CERTIFICATE OF ACCREDITATION OF COMPANIES AUTHORISED TO TEST AND CERTIFYING SAFETY OF LIFTING EQUIPMENTS

**1. PERHATIAN/ ATTENTION :**

Permohonan hendaklah dibuat oleh Pengurus atau Pegawai yang diberi kuasa oleh Syarikat dimana berkenaan.  
*The applications have to be done by the Officer in Charge appointed by the Company where appropriate.*

**2. DOKUMEN-DOKUMEN DIPERLUKAN/ SUPPORTING DOCUMENTS :**

Sila  Petak [ Please  Box ]

- Borang Pendaftaran/ *Registration Form – ABCi/SCS/Lifting (2018);*
- Mempunyai Sijil/ *Possess Certificate – Lifting Equipment Engineering Association UK (LEEA);*
- Mengikuti Kursus dan Peperiksaan sebagai Pemeriksa Jentera Pengangkutan/ *Follow course and exam as lifting appliances examiner;*
- Mempunyai pengalaman dalam membuat pemeriksaan ke atas Jentera Pengangkat/ *Have experience in doing examination on Lifting Appliances;*
- Keterangan Peribadi/ *CV;*
- Salinan Sijil-Sijil/ *Copies of Certificates*

**3. JENIS PENDAFTARAN DAN YURAN/ TYPE OF REGISTRATION AND FEES :**

Sila  Petak [ Please  Box ]

- B\$ 400.00 - Pendaftaran Baru/ *New Application Fee*
- B\$ 200.00 - Membaharui Pendaftaran/ *Annual Registration Fee*

**4. PERBADANAN PERSIJILAN/ CERTIFICATION BODY :**

**NAMA PERBADANAN PERSIJILAN / PEMERIKSA BAGI KREN/ JENTERA PENGANGKAT**

*NAME OF CERTIFICATION / INSPECTION BODY FOR CRANE / LIFTING EQUIPMENT :*

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**ALAMAT SYARIKAT/ COMPANY ADDRESS :**

i) Alamat Berdaftar/ *Registered Address :*

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.....

Poskod/ *Postcode :* .....

Office Tel.: ..... Fax No.: ..... Email.: .....

ii) Pegawai Dihubungi/ *Contact Person :*

Nama/ *Name :* .....

Office Tel.: ..... Fax No.: ..... Email.: .....

<b>5. SKOP AKTIVITI YANG DIPOHONKAN UNTUK DI IKTIRAF/ SCOPE OF ACTIVITY FOR WHICH RECOGNITION IS SOUGHT :</b>						
<b>JENIS KREN/JENTERA PENGANGKUT/ TYPE OF CRANE/LIFTING EQUIPMENT</b>						
<b>6. PEGAWAI KOMPETEN YANG DIBERI KUASA MENJALANKAN PERSIJILAN PEMERIKSAAN BAGI KREN / JENTERA PENGANGKAT/ AUTHORISED COMPETENT PERSON PERFORMING CERTIFICATION / INSPECTION OF CRANE / LIFTING EQUIPMENT :</b>						
<b>NAMA PEGAWAI YANG KOMPETEN NAME OF COMPETENT PERSON</b>				<b>KELULUSAN QUALIFICATION</b>		
<b>7. SENARAI SYARIKAT/ LIST OF FIRMS :</b> (Rekod klien dalam satu (1) tahun lepas) (Submit record of clients for the previous 1 year)						
BIL./ NO.	SENARAI SYARIKAT YANG MEMOHON PERSIJILAN BAGI SENARAI JENTERA LIST TO FIRM APPLYING CERTIFICATION OF LIFTING EQUIPMENT	JENIS KREN / JENTERA PENGANGKAT TYPE OF CRANE/ LIFTING EQUIPMENT	KETERANGAN/ DESCRIPTION			JUMLAH KUANTITI TOTAL QUANTITY
			MODAL/BUATAN MODEL/MAKE	BERAT WEIGHT	NEGERI ASAL COUNTRY OF ORIGIN	
<b>8. PENGESAHAN [ FORMAL DECLARATION ]:</b>						
<p>Saya / Kami mengaku dan mengesahkan bahawa maklumat diberikan dan salinan-salinan dokumen-dokumen yang dihadapkan adalah tulen dan betul. Saya / Kami tahu dan faham bahawa pemalsuan terhadap sebarang maklumat dan dokumen-dokumen yang disertakan menjadikan permohonan saya / kami ditolak dan sebarang kebenaran terdahulu akan ditarik balik.</p> <p><i>I / We declare and confirm that the information given and photostated copies of documents submitted as requested are authentic. I / We am / are aware and understand that any information and documents found to be false shall cause my / our application to be rejected and any approval granted shall be revoked.</i></p>						
Tandatangan/ Signature			:.....			
Nama/ Name			:.....			
Jawatan/ Designation			:.....			
Bilangan Kad Pengenalan / Pasport/ I.C. / Passport			:.....			
Tarikh/ Date			:.....			
Cop Syarikat/ Company Chop			<div style="border: 1px solid black; width: 100px; height: 50px; margin: 0 auto;"></div>			

\*Sila lampirkan maklumat tambahan (jika perlu) [Please attach additional info (if necessary)]

<b>Untuk Kegunaan Pejabat Sahaja [ For Office Use Only ]</b>	
Tarikh Menerima/ Date Received : _____	Nama Penerima/ Person Received : _____
Bil. Rujukan/ Reference No.: _____	Bil. Pendaftaran/ Registration No.: _____
Jenis Permohonan/ Type of Application : _____	Bil. Resit/ Resit No.: _____