



Practising Engineers Architects and Town Planners Association (India)

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PASSPORT
SIZE COLOUR
PHOTOGRAPH

APPLICATION FORM FOR YEARLY SUBSCRIPTION

(Note : Please read instructions overleaf carefully before filling up the form)

To,

Date: _____ 201

The President,

Practising Engineers Architects and Town Planners Association (India)

Unit No. A-103, 1st Floor, New Udyog Mandir No. 2,

Behind Johnson & Johnson, 7-C, Mogul Lane, Mahim (W), Mumbai - 400 016.

I the undersigned, member of the Association and my Membership No. is _____ i wish to renew my membership. I enclose herewith cash/cheque for Rs. _____ /- in favour of **PEATA (I)** towards following :-

- Rs. 2,000/- Per year**
- Rs. 15,000/- for 10 years (If amount is paid for 10 years @Rs. 1500/- per year)**

My Personal Details are as follows :

- Name in full Mr./Mrs./Ms. _____
(with surname first) (Surname) (Name) (Father/Husband's Name)
- Name of Establishment _____
- Designation : Proprietor Partner Associate Director
- a) Office address : _____

_____ b) Residential address : _____

- Phone No. _____ Phone No. _____
- Whatsapp No. _____ Fax No. _____
- E-mail _____ Email _____

Note : Please Tick Mark in appropriate for Correspondence Address.

- Date of Birth _____ • Age _____ years • Blood Group _____
- PAN No. _____
- Service Tax Code (PAN BASED) _____
- Technical Qualifications _____
- Registration Details :**
 - Surveyor / Structural Engineer's License, issued by Municipal Corporation of Gr. Mumbai OR any other please specify License No. _____ Date _____
 - Registration Certificate issued by, Council of Architecture - New Delhi. Registration No. _____ Date _____

Note : Attach Attested Xerox Copy of up to date valid, Surveyor's / Structural Engineer's License, issued by M.C.G.M. or any other / or Registration Certificate issued by the Council of Architecture - New Delhi.

10. Number of years in Practice as Licenced Surveyor/Architect/Structural Engineer/Town Planner/Regd. Valuer/
Landscape Architect/Interior Designer or any other related profession : _____ years.

11. Special field of Interest/Expertise _____

12. Membership of any other Professional Societies / Association / Institution with Registration Nos.

i) _____

ii) _____

(Name & Signature of the Applicant)

Date _____ 201

Encl : _____

FOR OFFICE USE ONLY

1. Received cash / cheque of Rs. _____ /- towards Renewal Fees

Date ____ - ____ - 201

(Jt. Hon. Secretary)

INSTRUCTIONS FOR FILLING UP THE FORM

- 1) Fill up Form in **Capital Letters** only.
- 2) Strike out portion not necessary / not applicable.
- 3) Tick mark in appropriate box for Designation (Item No. 3) & address for correspondence (Item No. 4).
- 4) Please inform change of address for correspondence, if changed any time during the Membership to avoid inconvenience to each other.