

LEMBAGA ARKITEK MALAYSIA

FORM A2

PROJECT STATUS UPDATE BY PROFESSIONAL ARCHITECTS on Applications for Approval by Local Authorities General Circular No. 4/1997



PROJECT PARTICULARS

1. Name of Local authority
(to which application was made)
2. Name & Address of project
.....
.....
3. Category of Client a. Individual b. Corporation c. Institutional d. Charity
(Please 'X') e. Privatisation project f. Govt. Agency g. Statutory Body
4. Approx. Total Cost of Works RM.....
5. Project Category
- | | |
|--|----------------------|
| <input type="checkbox"/> (a) RESIDENTIAL – Detached Houses on Individual Lots | No. of Units : |
| <input type="checkbox"/> (b) RESIDENTIAL – Other Types of Houses | No. of Units : |
| <input type="checkbox"/> (c) RESIDENTIAL – Subdivided Buildings | No. of Units : |
| <input type="checkbox"/> (d) RENOVATION WORKS | |
| <input type="checkbox"/> (e) MIXED DEVELOPMENT – Shophouses with Residential, etc | |
| <input type="checkbox"/> (f) COMMERCIAL – Office, Retail Shopping Centre, etc. | |
| <input type="checkbox"/> (g) RECREATIONAL – Clubs, sport stadia, etc. | |
| <input type="checkbox"/> (h) HOTEL | |
| <input type="checkbox"/> (i) INDUSTRIAL – Factory, power plants, etc. | |
| <input type="checkbox"/> (j) EDUCATIONAL – School, college, university, etc. | |
| <input type="checkbox"/> (k) HEALTH – Clinic, hospital, etc. | |
| <input type="checkbox"/> (l) INSTITUTIONAL – Prison, police station, zoo, etc. | |
| <input type="checkbox"/> (m) CONSERVATION – Restoration, adaptive reuse, etc. | |
| <input type="checkbox"/> (n) OTHERS – Religious Building or Others [Please describe] | |

PROJECT UPDATE

6. Submission & Approval Initial Return Follow up Return Update No. :
- | <u>Nature of Submission</u> | <u>Submission Date</u> | <u>Approval Date</u> |
|-----------------------------|------------------------|----------------------|
| (a) Layout Approval | | |
| (b) Planning Approval | | |
| (c) Building Approval | | |
7. Construction (a) Commencement Date
- (b) Completion at end of current half year.....%
- (c) Completion Date

Signature of submitting person Date

Name & designation

- NOTES :**
1. Approx. Total Cost of Works excludes cost of the site, fees and finance charges on which the fees are based.
 2. Please make copies of this Form and use one Form per project.
 3. All returns are for LAM's own use and will be treated as confidential.