Application for Alteration or Addition to the Premises of a Columbarium under Section 53 of the Private Columbaria Ordinance (PCO) (Cap. 630)

Report on the Completion of Alteration or Addition Works by the Holder of the Specified Instrument

To: Private Columbaria Licensing Board

Part A: Particulars of the specified instrument

Specified instrument number:					
Name of the holder of the specified					
instrument:					
Name of the columbarium:					
Address of the columbarium:					
Part B: Information of the notice of app	oroval-in-princi	ple issued	by the	Private	
Columbaria Licensing Board in respect of the above application under section 53 of the					
<u>PCO</u>					
Date of the notice of approval-in-principle:	// 20_	(dd/	mm/ yyy	y)	
Part C: Report on the completion of alterati	on or addition	works by t	he holde	r of the	
specified instrument					
(1) Date of the completion of alteration or ad	dition works: _			_	
(2) Attachments to the report on the complet	ion of alteration	or addition	n works:		

(i) a copy of certification of proposed revised plans completed by the holder of the specified instrument and a qualified professional (see the templates for "Certification of Proposed Plans in Respect of Pre-cut-off Columbarium under Application for Licence (To be completed by Applicant)" and "Certification of Proposed Plans in Respect of Pre-cut-off Columbarium under Application for Licence (To be completed by Qualified Professional)" at Annex 13 of the Application Guide for Private Columbarium Licence and Other Specified Instruments) for certifying that the current site situation conforms to the proposed revised plans submitted by the above licence holder on ____/__/ 20_______

(dd /mm/ yyyy); and 11 copies of the proposed revised plans verified by the holder of the specified instrument and the qualified professional, including the proposed revised floor plans, the niche number diagrams of the proposed revised floor plans, plus an electronic copy of the above proposed revised plans;

- (ii) <u>two copies</u> of the original Excel table of the niche information verified by the holder of the specified instrument and the qualified professional, with a photocopy and an electronic copy;
- (iii) Documents of compliance with the requirements on electrical and mechanical safety of the Electrical and Mechanical Services Department (if applicable) (please refer to the Appendix for details).

Part D: Others (if applicable)				
Part E: Signature of t	the holder of the spec	cified instrument		
	<u>=</u>	nment/an authorized person*, hereby confirm that nents and/or appendices) is true and complete.		
Signatur	re :(Holder o	of the specified instrument/Authorized person*)		
Name	:			
Position	:			
Contact	telephone number	:		
_	ong Identity Card/locument* number	:		
Date		:		
,	y chop older of the specified ent is a company)			

^{*} Please delete as appropriate.