



QUANTITY SURVEYORS REGISTRATION BOARD OF NIGERIA

CONDITIONS FOR CHANGE OF NAME/STATUS OF REGISTERED FIRM/COMPANY

1. Form is obtained for **₦50,000.00 (Fifty Thousand Naira Only)**. Payment should be made through Remita from any Commercial Bank or Online by following the steps below:
 - a. log in to www.remita.net
 - b. from the displayed page, under “**Search here a biller**”, type and select **Quantity Surveyors Registration Board of Nigeria**
 - c. fill in the details as required for instance, under **Name of Service/Purpose**; select “**Firm Application Form**”, fill in others appropriately then click “**Submit**”
 - d. From the displayed page, input details of you Debit Card (ATM Card) to make the payment online **OR Click on “Bank Branch”** to generate a **Remita Retrieval Reference (RRR)** Number and take it to any commercial bank for payment.
2. At least one of the Partners/Directors must be a Registered Quantity Surveyor and **must have current Practice Licence with the Board.**
3. Copies of the following documents are to be submitted along with the form:
 - i. QSRBN Registration Certificate of the firm bearing the old name/status;
 - ii. current practice licence of the Firm (bearing the old name);
 - iii. current practice licence of the principal partner/Director and other partner(s) if any;
 - iv. curriculum vitae (CV) and credentials of all the Partners/Directors;
 - v. NIQS Registration Certificate of the firm (bearing the new name/status);
 - vi. CAC Certificate of Registration/Incorporation (bearing the new name);
 - vii. memorandum and Article of Association;
 - viii. form CAC 2;
 - ix. form CAC 7.
4. Completed form with copies of the above documents should be forwarded to:

The Registrar,
Quantity Surveyors Registration Board of Nigeria,
21, 4th Avenue (Sa’adu Zungur),
Gwarimpa,
Abuja-FCT.



QUANTITY SURVEYORS REGISTRATION BOARD OF NIGERIA

(Established by Decree No. 31 of 1986 (Now CAP Q1 LFN 2004))

CHANGE OF NAME/STATUS OF REGISTERED QUANTITY SURVEYING FIRMS AND COMPANIES

1.0 GENERAL INFORMATION THE NEW STATUS

1.1.1 New Name of the Firm or Company: _____

1.1.2 Current Name of the Firm or Company: _____

1.2.1 QSRBN Firm Reg. No: _____ Date of Registration: _____

1.2.2 CAC Reg. No: _____ Date of Registration: _____

1.2.3 NIQS Firm Reg. No: _____ Date of Registration: _____

1.3 Nature of Practice: _____

1.4 Head Office Address: _____

Telephone No. /Fax No: _____

E-mail: _____

1.5 Date of Commencement of Practice: _____

1.6 Names & Reg. No. of Partners or Director (s):

i. _____ Reg. No. _____

ii. _____ Reg. No. _____

iii. _____ Reg. No. _____

1.7 Reason(s) for the change of Name/Status: _____

2.0

CURRICULUM VITAE OF PARTNERS/DIRECTORS

(Detailed C.V. and photocopies of credentials of the Partners/Directors to be attached)

2.1 Surname: _____ Other Names: _____

2.2 Previous or Maiden Name: _____

2.3 Date of Birth: _____

2.4 Academic Qualification: _____

2.5 Professional Qualifications: _____

2.6 Post Qualification Experience: _____

2.7 Residential Address: _____

2.8 QSRBN Registration No.: _____

2.9 Nationality: _____

3.0

RESOURCES

3.1 **PERSONNEL**

3.1.1 Names of Registered Quantity Surveyors with Reg. Nos:

i. _____ Reg. No. _____

ii. _____ Reg. No. _____

iii. _____ Reg. No. _____

3.1.2 Names of other support staff with qualifications:

i. _____

ii. _____

iii. _____

iv. _____

3.2 Names of Professional from Other Disciplines with Reg. Nos:

Architects _____ Reg. No. _____

Engineers _____ Reg. No. _____

Estate Surveyors _____ Reg. No. _____

Builders _____ Reg. No. _____

Planners _____ Reg. No. _____

Others _____ Reg. No. _____

_____ Reg. No. _____

_____ Reg. No. _____

3.3 EQUIPMENT RESOURCES (*List Office Equipment Presently in Stock*)

4.0 PROFESSIONAL INDEMNITY INSURANCE

Provide evidence of current professional indemnity insurance of practice (photocopy of the Insurance Certificate to be attached)

5.0 DECLARATION

I/We, _____
_____ ,

do hereby apply for the change of name/status of the firm or company from (current name) _____
_____ to
(new name) _____ to practise
Quantity Surveying in Nigeria.

I/We do hereby declare that if the change is approved, I/we shall comply strictly with the rules and regulations made by Quantity Surveyors Registration Board of Nigeria in pursuance of the requirements of Decree No. 31 of 1986 (Now CAP Q1 LFN, 2004) and extant regulations including annual renewal of Practice Licence of the firm and Professional Indemnity Insurance.

Signed for/on behalf: _____

Name and Status: _____

Date: This Day, _____, 20____

Witness by:

Name: _____ RQS No. _____

Address: _____

Sign: _____ Date: _____

FOR OFFICE USE ONLY

Date Received: _____

Date Submitted to Committee: _____

Fees Paid: _____

Approved: _____

Rejection (reason for the rejection) : _____

President's Signature
QSRBN

Registrar's Signature
QSRBN