



HRVATSKA KOMORA INŽENJERA STROJARSTVA
CROATIAN CHAMBER OF MECHANICAL ENGINEERS
CRN: 2539071
PIN: 26023027358

Ulica grada Vukovara 271
HR - 10 000 Zagreb
Tel. +385 (1) 7775-570
Fax. +385 (1) 7775-574
Web: www.hkis.hr E-mail: info@hkis.hr

APPLICATION FOR ENTRY IN THE RECORDS OF WORK PERMITS ISSUED TO FOREIGN MECHANICAL ENGINEERS

Form 9.1.

FILLED IN BY CCME

Date of submission:		CLASS:	
CLASS:		REG. NO.:	251-503/____-____-____-____
REG. NO.:	251-503/____-____-____-____	Date of issue:	

With this application I wish to be entered into the Records of work permits issued to foreign engineers for the performance of design engineering

*Pursuant to Article 67 of the Act on Physical Planning and Building Tasks and Activities
(Official Gazette of the Republic of Croatia no. 78/15, 118/18 i 110/19)*

1. PERSONAL DATA

NAME: _____ SURNAME: _____

Personal document (please mark):

ID card

Passport

Citizenship certificate

Personal document number: _____

Valid until (mm/yyyy): _____

Place of issuance of the personal document: _____

Country of issuance of the personal document: _____

Gender: **M** **F** Tax number: _____ (TIN - tax identification number / master citizen number)

Date of birth: _____ Place of birth: _____

Country of birth: _____ Citizenship: _____

PERMANENT RESIDENCE

Street and house number: _____

Zip code: _____ City: _____ Country: _____

TEMPORARY RESIDENCE

Street and house number: _____

Zip code: _____ City: _____ Country: _____

PERSONAL CONTACT INFORMATION

Phone: _____ Cell phone (with area code): _____

E-mail address: _____

CONTACT INFORMATION OF THE COMPANY OF EMPLOYMENT

Name of the company of employment: _____

Phone: _____ **Cell phone (with area code):** _____
E-mail address: _____

2. REGULATED PROFESSION

Name of professional qualification: _____

Are you qualified to perform the aforementioned regulated profession in the country which you come from? (please mark) YES NO

(If you answered YES, please state the attachment proving the qualification and the name of the institution that issued it)

Is the profession in question regulated in the country you come from? (please mark) YES NO

(If you answered YES, please state the full name of the competent authority that regulates the profession)

Is formal education which enables you to perform the subject profession organized in the country which you come from? (please mark) YES NO

Have you been authorized to perform the regulated profession in another EU Member State? (please mark) YES NO

If you answered YES, please state the name of the country and the full name of the competent authority which issued the authorization (proof must be attached)

3. INFORMATION ON EDUCATION AND TRAINING

Name of the educational institution in original language: _____

Address and country of the educational institution: _____

Professional title in the original language and its abbreviation: _____

Duration of education and training: _____

Education start date: _____ **Education completion date:** _____

Acquired number of ECTS credits: _____ **Level of education according to EQF (European Qualifications Framework):** _____

Certificate issued by a competent authority on meeting the conditions for performing the regulated profession (attach proof): YES NO

Other proof of formal education (attach proof): YES NO

Proof of content and the course of training - areas and subjects (attach proof): YES NO

Proof of other qualifications (specify which and attach): YES NO

Acquired level of education according to EQF - European Qualifications Framework (please mark):

<input type="checkbox"/>	primary school - Level 1 (8 years)
<input type="checkbox"/>	level 1 + professional training for simple jobs – Level 2
<input type="checkbox"/>	lower professional qualification – Level 3 (1-2 years)
<input type="checkbox"/>	completed secondary education – Level 4 (4 years)
<input type="checkbox"/>	professional study – Level 5 (from 120 to 179 ECTS credits / more than 2 years and less than 3 years)
<input type="checkbox"/>	undergraduate and professional study – Level 6 (from 180 to 240 ECTS credits / 3 - 4 years)
<input type="checkbox"/>	university graduate and specialist graduate and postgraduate specialist study – Level 7 (1-2 years)
<input type="checkbox"/>	postgraduate master study - Level 8 (2 years)
<input type="checkbox"/>	postgraduate doctoral study – Level 9 (3 and more years)

4. KNOWLEDGE OF THE CROATIAN LANGUAGE

I can speak Croatian (please mark the degree of knowledge of the language): A B C

I will use translation services

YES NO

5. PROFESSIONAL EXPERIENCE (professional experience in performing the regulated profession):

Self-employed person: **YES NO** or **Employed person:** **YES NO**
from (date): _____ to (date): _____

Full name of the company of employment: _____

Job title: _____

Job description: _____

6. Please indicate the professional works which you performed in the field of design

7. PROFESSIONAL LIABILITY INSURANCE:

Do you have any insurance coverage or other means of personal / collective insurance related to professional liability for performing design work

YES NO

If you marked NO, before taking over the decision on the entry, it is necessary to submit a professional liability insurance policy for a min. amount of 132.722,81 € / HRK 1,000,000.00

Insurer's name: _____

Policy number/expiration date/type of coverage: _____

Note: _____

8. POWER OF ATTORNEY By signing this Declaration, I hereby authorize the person indicated below to take over the documentation issued by the Chamber on the basis of this Application on my behalf!

Name and surname of the proxy: _____

Phone/cell phone number (with area code): _____

E-mail: _____

CROATIAN CHAMBER OF MECHANICAL ENGINEERS, Ulica grada Vukovara 271, Zagreb, is the controller with regard to your personal data. We collect your data, such as name, surname, gender, PIN, place and country of birth, citizenship, address, contact, place of work, occupation, level of education, name of the completed study, signature, etc., on the basis of law and other applicable regulations. Access to your personal data may be granted to a specially authorized person designated by the responsible person of the controller and/or another legal entity authorized by us. Transfers of personal data are carried out only for the purpose of meeting legal obligations. Your rights are as follows: right of access, right of rectification, right of erasure, right of restriction of processing, right of objection and right of data portability. If you believe that your rights are not being respected, you have the right to lodge a complaint with the Personal Data Protection Agency.

BY SIGNING THIS DOCUMENT, I HEREBY DECLARE:

- 1. UNDER CRIMINAL AND SUBSTANTIVE LIABILITY, THAT THE DATA PROVIDED ABOVE ARE TRUE, AS WELL AS THE DOCUMENTATION SUBMITTED AND ATTACHMENTS TO THIS APPLICATION;**
- 2. THAT I AGREE THAT MY PERSONAL DATA, IN ACCORDANCE WITH THE PROVISIONS OF THE PERSONAL DATA PROTECTION ACT, MAY BE COLLECTED, PROCESSED AND STORED WITH THE CCME;**
- 3. THAT I AM FAMILIAR WITH THE ACTS REGULATING THE PERFORMANCE OF ACTIVITIES IN THE FIELD OF PHYSICAL PLANNING AND BUILDING, THE STATUTE AND OTHER DOCUMENTS OF THE CROATIAN CHAMBER OF MECHANICAL ENGINEERS;**
- 4. THAT I UNDERTAKE THE OBLIGATION TO PERFORM THE ACTIVITIES IN ACCORDANCE WITH THE AUTHORITIES ESTABLISHED BY THE LAW, CHAMBER DOCUMENTS, SPECIAL ACTS AND REGULATIONS ADOPTED ON THE BASIS OF THOSE ACTS;**

5. THAT I AGREE WITH THE PUBLICATION OF MY OFFICIAL DATA FROM THE CCME RECORDS.

Place and date: _____ Personal signature: _____

Necessary documentation

	proof of citizenship - a copy of a valid personal document (passport and/or identity card) or citizenship certificate
	proof that no measure of temporary and/or permanent revocation of the right to pursue the profession has been imposed by the competent authority in the home country, which shall not be older than 6 months
	employer's certificate of employment in the company of employment (date of employment, job title, type of work you perform, etc.)
	certificate of the acquisition of the right to prepare a tender submission
	reciprocity contract between the Republic of Croatia and the domicile country of the applicant (only for nationals of countries which are not members of the World Trade Organization)
	copy of the certificate of mandatory professional liability insurance valid for the territory of the Republic of Croatia and issued to the name of the applicant for a min. amount of 132.722,81 € / HRK 1,000,000.00 (with details of insurance or any other means of personal or collective protection with regard to professional liability of the applicant)
	proof of fee payment in the amount of 995.00 € / HRK 7.496,83 (the fee is increased by the amount of VAT for payments by legal or natural persons from the RoC)
	In case of payment made by a legal or natural person from the EU or third countries, the fee is not increased by the amount of VAT, and it is necessary to submit the tax number of the payer who uses it when delivering or acquiring goods and services.
	PAYER TAX NUMBER (must be stated) _____

The terms used in this Application in masculine gender are neutral and refer to men and women.

PAYMENT INSTRUCTIONS		
Recipient: CROATIAN CHAMBER OF MECHANICAL ENGINEERS		
Model: 00	Account number: HR5623600001102094156 SWIFT: ZABHR2X, Zagrebačka banka	Payment reference number: TAX NUMBER OF THE APPLICANT
Payment description: FEE - NAME AND SURNAME OF THE APPLICANT -		

Notes:

The application is completed in Croatian language

- If the recipient of the service is a VAT payer in the EU or in third countries, VAT is not charged
- If the recipient is a person who is not a taxpayer (natural person) in the EU or third countries, the service is taxed according to the registered address of the taxpayer who performed the services, i.e. the fee is increased by the amount of VAT
- All submitted documents should be certified translations into Croatian and certified copies and in Latin script.
- Proof of formal education and certificate of completed professional examination for carrying out construction works and other relevant certificates of completed professional examination acquired in the territory of the former Yugoslavia before 8 October 1991 are equated in legal effect with the relevant certificates acquired in the Republic of Croatia.