



City of Burnaby
 Building Division, Planning and Development Department
 2ND Floor, 4949 Canada Way, Burnaby, BC V5G 1M2
 Phone: 604-294-7130 Fax: 604-294-7986

CERTIFIED PROFESSIONAL (CP) PROGRAM PROJECT DIRECTORY FORM

Date: _____	Project Address: _____
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Please indicate who the Coordinating Registered Professional is:

Certified Professional

Name: _____

Firm's Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

Architect

Name: _____

Firm's Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

Structural Engineer

Name: _____

Firm's Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

Mechanical Engineer

Name: _____

Firm's Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

Plumbing Engineer

Name: _____

Firm's Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____



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CERTIFIED PROFESSIONAL (CP) PROGRAM PROJECT DIRECTORY FORM

Date: _____	Project Address: _____
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Fire Suppression Engineer

Name: _____

Firm's Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

Electrical Engineer

Name: _____

Firm's Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

Geotechnical Engineer

Name: _____

Firm's Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

Envelope Professional

Name: _____

Firm's Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

CP Stamp:

CP Signature: _____

Date: _____