Standard SCC Form

To: DPO/	, Planning Department
	Self-certification of Compliance of Landscape Works
	Lot No.:
	Address:
	Planning Application No.:
Ţ	, hereby confirm that the applicant of the above
	s appointed or authorized me to act on his/their behalf to submit a
	n of compliance of landscape works.
	, hereby confirm that I am a Registered Landscape Architect
(Registration N	No) registered under the Landscape Architects Registration
Ordinance.	
on dd/mm/yy approved LMP	s of the latest approved LMP/ LP* are attached / duly coloured to indicate the
	** Signature:
	Name of RLA:
	Date:
PlanD official of	chop:
Date of receipt	of this self-certification:
* Delete as appropri	ate

^{**} RLA's signature must be supported with the membership chop