

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

Secretariat of Kulhudhuffushi City Council
Kulhudhuffushi , Rep. of Maldives



Documents Verification for MQA

Applicant's Information

Full Name: ID Card No:
Permanent Address:
Current Address:
D.O.B:/...../..... Mobile No:
E-mail:

Submit all the documents mentioned in the MQA form checklist

Office (Finance) use only

Payment Received by:		
Name of the staff:	Receipt Number:	Stamp
Date:/...../.....	Sign:	

For each application: MVR 50.00 (Payment time during official days 08:30 to 12:00)