



Guideline for facility registration and operating license for currently operational resorts.

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CHAPTER 1: INTRODUCTION

This guideline is developed to provide guidance on registering and obtaining operating license for existing facilities that provide utility service, which is required as per the regulations published under the Energy Act (18/2021) and Water Act (8/2020) for facility registration and operating licensing (2023/R-78 and 2023/R-105).

The guideline covers filling the application form, the outline of the process flow and requirements to registration and licensing of operators for facilities that provide utility services in the resorts (tourism sector).

CHAPTER 2: APPLICATION FORM

- The application form required to apply for the service is GEN03: “Application for Utility Service Facility Registration and Operating License for Resorts”, which is available from the Authority’s website as both pdf and fillable (docx) versions.
- General information is covered under **General Information Section** of the application form.
- There are 2 services available from the same form which are:
 - Application for registration of facilities
 - Application for Operating License for facilities
- All facilities currently established on the resort can be submitted under the same application as multiple facilities established on the same island can be covered under the same application.

Chapter 2.1: SERVICE 1: APPLICATION FOR FACILITY REGISTRATION

| Section 1: Application Type | | 1 ވަނަ ބައި: ފުރުތަކުގެ ވައްތަރު |
|--|----------------------------------|---|
| Choose only one option from the following. | | |
| New Registration | <input type="checkbox"/> | ފުރުތަކުގެ ނորމަލް ރިޖިސްޓްރޭޝަން |
| Change of detail | <input type="checkbox"/> | ފުރުތަކުގެ ބަޔާން ބަދަލުކުރުން |
| Termination of registration | <input type="checkbox"/> | ފުރުތަކުގެ ރިޖިސްޓްރޭޝަން ހުއްދަ ހުޅުވުން |
| Re-issue (Lost or damaged) | <input type="checkbox"/> | ފުރުތަކުގެ ރިޖިސްޓްރޭޝަން ސެރްޓިފިކެޓް ގެއްލިފައިވާ ނުވަތަ ބަދަލުވާ ހާލަތުގައި ފުރުތަކުގެ ރިޖިސްޓްރޭޝަން ސެރްޓިފިކެޓް ބަދަލުކުރުން |
| Registration No. (if not new): | Click or tap here to enter text. | ފުރުތަކުގެ ރިޖިސްޓްރޭޝަން ނަންބަރު (ނުވަތަ ފުރުތަކުގެ ރިޖިސްޓްރޭޝަން ސެރްޓިފިކެޓް ގެއްލިފައިވާ ނުވަތަ ބަދަލުވާ ހާލަތުގައި ފުރުތަކުގެ ރިޖިސްޓްރޭޝަން ސެރްޓިފިކެޓް ބަދަލުކުރުމަށް ބޭނުންކުރާ ނަންބަރު): |

The type of application can be chosen in this section.

- New registration: If a facility is being registered for the first time
- Change of detail: If there is a change to the details of an already registered facility.
- Termination of registration: If a facility is decommissioned and no longer in service and the registration of the facility needs to be terminated
- Re-issue: If for any reason the owner of the facility would like a copy of the registration to be reissued.
- Registration No. (if not new): This is the reference number of the registration certificate for registered facilities.

| Section 2: Type and purpose of Facility | | 2ވަނަ ބައި: ސަރަޙައްދުގެ ބާވަތު ބަނޑުވަނު ބަނޑުވަނު ބަނޑުވަނު | |
|---|--|---|--|
| Choose all appropriate. | | މުހިއްސާކުރާ ބަނޑުވަނު ބަނޑުވަނު ބަނޑުވަނު. | |
| Power System for | | ހަރަކާތުގެ ސަރަޙައްދު ބަނޑުވަނު | |
| A2. Commercial & Industrial | <input type="checkbox"/> | A2. ޕްރައިވެޓް ބަނޑުވަނު ބަނޑުވަނު ބަނޑުވަނު | |
| B1. Independent Power Producer | <input type="checkbox"/> | B1. ޕްރައިވެޓް ބަނޑުވަނު ބަނޑުވަނު ބަނޑުވަނު | |
| B2. Network/Infrastructure Operation | <input type="checkbox"/> | B2. ނެޓްވર્ކް ބަނޑުވަނު ބަނޑުވަނު ބަނޑުވަނު | |
| Water Supply System for | | ފެން ފޯމުގެ ސަރަޙައްދު ބަނޑުވަނު | |
| W-A2. Commercial & Industrial | <input type="checkbox"/> | W-A2. ޕްރައިވެޓް ބަނޑުވަނު ބަނޑުވަނު ބަނޑުވަނު | |
| W-B1. Independent Water Producer | <input type="checkbox"/> | W-B1. ޕްރައިވެޓް ބަނޑުވަނު ބަނޑުވަނު ބަނޑުވަނު | |
| W-B2. Network/Infrastructure Operation | <input type="checkbox"/> | W-B2. ނެޓްވર્ކް ބަނޑުވަނު ބަނޑުވަނު ބަނޑުވަނު | |
| Sewerage System for | | ނަޔާސަތުގެ ސަރަޙައްދު ބަނޑުވަނު | |
| W-A2. Commercial & Industrial | <input type="checkbox"/> | W-A2. ޕްރައިވެޓް ބަނޑުވަނު ބަނޑުވަނު ބަނޑުވަނު | |
| W-B3. Independent Sewerage Treatment plant | <input type="checkbox"/> | W-B3. ޕްރައިވެޓް ބަނޑުވަނު ބަނޑުވަނު ބަނޑުވަނު | |
| Detail Design/as-built Approved | Yes <input type="checkbox"/> No <input type="checkbox"/> | މަޢުލޫމާތު ދޭން ވާނެ ވާނެ ވާނެ ވާނެ | |
| Detail Design/as-built Approval Reference Number: | Click or tap here to enter text. | | |

Mark all the applicable options here for all facilities that are intended to be registered. Eg: to register power system and water system of a resort the applicant shall choose A2 and W-A2.

- Commercial & Industrial: All systems established to supply power (or self-use) for a commercial or industrial application. This includes resorts as well.
- Independent Power Producer: This is where power generation is done by a private party other than the service provider or operator and sells to the utility service provider (eg: solar PV system)
- Network/Infrastructure operation: If the applicant only operates part of the system that provides the utility service (eg: generation, transmission or distribution)
- For all existing facilities in operational resorts, if the as-built is endorsed by the Authority it is to be indicated and the reference number on the document issued stating the approval of as-built can be stated here. If there are multiple reference numbers for an application involving multiple facilities all the reference numbers shall be listed.

| Section 3: Owner Details (Applicant) | | 3 ވަނަ ބައި: ޕްރައިވެޓް ބަނޑުވަނު ބަނޑުވަނު ބަނޑުވަނު | |
|--------------------------------------|----------------------------------|---|--|
| Complete all of the following. | | މުހިއްސާކުރާ ބަނޑުވަނު ބަނޑުވަނު ބަނޑުވަނު. | |
| Business Name: | Click or tap here to enter text. | ބަނޑުވަނު ނަންމު: | |
| Address: | Click or tap here to enter text. | ހުޅެ ނަންމު: | |
| Atoll and Island: | Click or tap here to enter text. | ކަނޑުވަނު ނަންމު: | |
| Registry No: | Click or tap here to enter text. | ނަންބަރު ނަންމު: | |
| Contact No: | Click or tap here to enter text. | މުޢާމިރު ނަންމު: | |
| Email Address: | Click or tap here to enter text. | އިމެއިލު ނަންމު: | |

This section refers to the details of the owner of the facility. In most cases this is the owner of the resort. If the owner of the facility is not the resort owner there should be a document such as an agreement indicating the owner of the assets established on the resort.

| Section 4: Focal point Details | | 4 ވަނަ ބައި: ފોકަލް ޕޮއިންޓް ގެ ފަޞްލާތުގެ ފަޞްލާތުގެ ފަޞްލާތު |
|--------------------------------|----------------------------------|--|
| Complete all of the following. | | މި ބައިގައި ފޯމުގެ ފަޞްލާތުގެ ފަޞްލާތުގެ ފަޞްލާތު. |
| Name: | Click or tap here to enter text. | ނަންމު: |
| ID card Number: | Click or tap here to enter text. | އި.އ.ޖ. ނުވަތަ ސަރުކާރުގެ ފޮޓޯ: |
| Designation: | Click or tap here to enter text. | ހަދާފައިވާ މަސައްކަތް: |
| Email Address: | Click or tap here to enter text. | އިމެއިލް ބަޔާންކުރާ ސަރުކާރުގެ ފޮޓޯ: |
| Contact Number: | Click or tap here to enter text. | މުޢާމަލާތުގެ ނަންބަރު: |

This section refers to the details of the focal point on behalf of the owner regarding the facility.

| Section 5: Declaration | | 5 ވަނަ ބައި: ބަޔާންކުރުން |
|--|-----------|---|
| <p>I hereby certify that the information provided above is complete, true and correct to the best of my knowledge and shall produce proof of such information if I am called upon to do so. I agree to facilitate any site inspections required by the Authority. I am aware that the Utility Regulatory Authority reserves the right to reject this application, if found that the information provided is false. Additionally, I agree to the terms and conditions of any approval that results from this application.</p> | | |
| Name | Signature | Stamp (if business) |
| Click or tap here to enter text. | | ބަޔާންކުރާ ފަރާތްގެ ސަބަބުން (މަސައްކަތް ކުރާ ފަރާތް) |
| Designation | | |
| Click or tap here to enter text. | | |
| Date | | |
| Click or tap to enter a date. | | |

This section is the declaration by the owner. And should be signed by the owner or a person who has the capacity to sign on behalf of the owner.

| Annex 1: Documents to be submitted along with the form | | 1 ވަނަ ބައި: ފޮރމުގެ ފަޞްލާތުގެ ފަޞްލާތުގެ ފަޞްލާތު |
|--|--------------------------|--|
| Choose all appropriate. | | މި ބައިގައި ފޯމުގެ ފަޞްލާތުގެ ފަޞްލާތުގެ ފަޞްލާތު. |
| Resort Operating License | <input type="checkbox"/> | ރިސޯޓް ގެ ފަޞްލާތުގެ ފަޞްލާތުގެ ފަޞްލާތު |
| Copy of Focal Point ID/Registration | <input type="checkbox"/> | ފޮކަލް ޕޮއިންޓް ގެ ފަޞްލާތުގެ ފަޞްލާތުގެ ފަޞްލާތު ނުވަތަ ސަރުކާރުގެ ފޮޓޯ |
| Notarized power of attorney document (for focal point) | <input type="checkbox"/> | ނޯޓަރިޔަލް ފަޞްލާތުގެ ފަޞްލާތުގެ ފަޞްލާތުގެ ފަޞްލާތު (ފޮކަލް ޕޮއިންޓް ގެ ފަޞްލާތު) |

This section refers to the documents that need to be submitted for facility registration.

- Resort operating license: This is the license issued by the Ministry of Tourism
- Copy of Focal Point ID/Registration: This is the identification document for the focal point. For locals this is their national identity card. For foreigners this can be official documents such as passport or work permit.
- Power of attorney document (for focal point): This is a letter/document issued by the company (owner) stating the focal point that has been assigned.

Chapter 2.2: SERVICE 2: APPLICATION FOR OPERATING LICENSE

| Section 1: Application Type | | 1 ވަނަ ބައި: ފަންނަ ދިނުން | |
|--|------------------------------------|---|--|
| Choose only one option from the following. | | | |
| Application Type: | | އެދިފައިވާ ލައިސަންސް ގެ ތެރެއިން ތިޔަބޭނުންކުރާ ލައިސަންސް ގެ ވައްތަރު ជެފް. | |
| New | <input type="checkbox"/> | މަދު ލައިސަންސް | |
| Renew | <input type="checkbox"/> | އިތުރުކުރުމުގެ ލައިސަންސް | |
| Termination of License | <input type="checkbox"/> | ލައިސަންސް ގެ ފަންނަ ހުއްދަ ހުޅުވުން | |
| Re-issue (Lost /damaged) | <input type="checkbox"/> | ލައިސަންސް ގެ ފަންނަ ހުއްދަ (ފެލިވުމުގެ ސببުން) ފަނޫން | |
| License Type: | Temporary <input type="checkbox"/> | Permanent <input type="checkbox"/> | ލައިސަންސް ގެ ވައްތަރު: ވަނަވަނަ ލައިސަންސް ލައިސަންސް |
| Existing Operating License Number (if applicable): | Click or tap here to enter text. | | އެދިފައިވާ ލައިސަންސް ގެ ނަންބަރު ފަނޫން (ނުވަތަ ލައިސަންސް ގެ ނަންބަރު): |
| License period in years for permanent licenses (Refer to Annex 7) | Click or tap here to enter text. | | ލައިސަންސް ގެ ފަންނަ ހުއްދަ ގެ ދުވަސް ފަނޫން (އެދިފައިވާ ލައިސަންސް ގެ ފަންނަ ހުއްދަ 07 ވަނަ ބައި) |
| Note: All temporary licenses will be issued for a period of 01 (one) year. | | | |

This section refers to the type of application.

- For application type the applicant shall choose one of the options available.
 - New: Application for a new license
 - Renew: If applying to renew an issued license for an existing licensed operator.
 - Termination of license: If the operator is no longer operating the already licensed facility and their license has a remaining validity period the operator can apply to terminate their active license.
 - Re-issue: If an operator needs a copy of the license issued to them due to the document being lost or damaged.
- For license type the applicant shall choose one of the options available
 - Temporary: This is a temporary operating license issued for a maximum duration of 1 year.
 - Permanent: This is a permanent operating license issued for a stated period between 5-10 years.
- Exiting operating license number: this is the reference number if there is a license already issued to the operator of the stated facility. This is applicable to all applications except “New” type applications.
- Licensing period: this can be left blank if applying for a temporary license as the issued license will be for 1 year. For permanent license the applicant shall state between 05 – 10 years as stated in Annex 7.

| Section 2: Operator Details | | 2 ވަނަ ބައި: ރިސާޓް ފަންނަ ފަންނަ ފަންނަ | |
|--------------------------------|----------------------------------|--|------------------------------------|
| Complete all of the following. | | | |
| Name of Company: | Click or tap here to enter text. | | ފަންނަ ފަންނަ ފަންނަ |
| Registration Number: | Click or tap here to enter text. | | ފަންނަ ފަންނަ ފަންނަ ފަންނަ ފަންނަ |
| Mailing Address: | Click or tap here to enter text. | | ފަންނަ ފަންނަ |
| Email Address: | Click or tap here to enter text. | | ފަންނަ ފަންނަ ފަންނަ |
| Contact Number: | Click or tap here to enter text. | | ފަންނަ ފަންނަ ފަންނަ |
| Website: | Click or tap here to enter text. | | ފަންނަ ފަންނަ |

This section refers to the details of the operator. If the facility is operated by the resort the resorts details are to be filled here.

| Section 3: Focal point Details | | 3 ވަނަ ބައި: ފޯކަލް ޕޮއިންޓް ގެ ތަފްޞީލް |
|---|----------------------------------|--|
| Complete all of the following. <i>މިއަދުގެ ތެރޭގައި ފޯކަލް ޕޮއިންޓް ގެ ތަފްޞީލް ފުރިހަމަކުރައްވާށެވެ.</i> | | |
| Name: | Click or tap here to enter text. | ނަންމު: |
| ID card Number: | Click or tap here to enter text. | އި.ކެ.ޖ. ނުވަތަ ސަރުކާރުގެ ބޭނުންކުރާ ސަފުޔު ނުމަނިދު ގެ ނަންބަރު: |
| Designation: | Click or tap here to enter text. | މަޢުލޫމާތު: |
| Email Address: | Click or tap here to enter text. | އިމެއިލްގެ ބޭނުންކުރާ ސަފުޔު ނުމަނިދު ގެ ނަންބަރު: |
| Contact Number: | Click or tap here to enter text. | މަޢުލޫމާތު ނުވަތަ ސަރުކާރުގެ ބޭނުންކުރާ ސަފުޔު ނުމަނިދު ގެ ނަންބަރު: |

This section refers to the focal point on behalf of the operator. This is the person the Authority will contact regarding the operations of the facility.

| Section 4: Declaration | | 4 ވަނަ ބައި: ބަޔާން |
|--|-----------|------------------------|
| <p>I hereby certify that the information provided above is complete, true and correct to the best of my knowledge and shall produce proof of such information if I am called upon to do so. I agree to facilitate any site inspections required by the Authority. I am aware that the Utility Regulatory Authority reserves the right to reject this application, if found that the information provided is false. Additionally, I agree to the terms and conditions of any approval that results from this application.</p> | | |
| Name | Signature | Stamp (if business) |
| Click or tap here to enter text. | | |
| Designation | | |
| Click or tap here to enter text. | | |
| Date | | |
| Click or tap to enter a date. | | |

This section refers to the declaration of the operator. The application shall be signed by a responsible person of the operating company.

| Annex 2: Documents to be submitted along with the form | | 2 ވަނަ ބައި: ފޯމުގައި ހަވާލުކުރަންޖެހޭ ސަފުޔު ނުމަނިދު ގެ ފަންޖަރު |
|---|--------------------------|---|
| Required for all applicants <i>ފޯމުގައި ހަވާލުކުރަންޖެހޭ ސަފުޔު ނުމަނިދު ގެ ފަންޖަރު</i> | | |
| Copy of Resort Operating License | <input type="checkbox"/> | ރިސޯޓް ގެ ބޭނުންކުރާ ސަފުޔު ނުމަނިދު ގެ ފަންޖަރު |
| Copy of Focal Point ID/Registration | <input type="checkbox"/> | ފޯކަލް ޕޮއިންޓް ގެ ބޭނުންކުރާ ސަފުޔު ނުމަނިދު ގެ ފަންޖަރު |
| Notarized power of attorney document (for focal point) | <input type="checkbox"/> | ފޯކަލް ޕޮއިންޓް ގެ ބޭނުންކުރާ ސަފުޔު ނުމަނިދު ގެ ފަންޖަރު (ފޯމުގައި) |
| Network coverage (if there is no detail design/as-built approved) | <input type="checkbox"/> | ނެޓްވޯކް ކޮވަރޭޖް (ނެޓްވޯކް ކޮވަރޭޖް ނުވަތަ ސަފުޔު ނުމަނިދު ގެ ފަންޖަރު ނުވަތަ ސަފުޔު ނުމަނިދު ގެ ފަންޖަރު) |
| Commissioning Report | <input type="checkbox"/> | ކޮމިޝަނިންގ ރިޖޯޓް |
| Please refer to Annex 4 (A & B) for commissioning report template. (only for newly developed resorts) | | |

This section refers to the documents that have to be submitted with all applications.

- Copy of resort operating license: This is the license issued by Ministry of Tourism.

- Copy of Focal Point ID/Registration: This is the identification document for the focal point. For locals this is their national identity card. For foreigners this can be official documents such as passport or work permit.
- Power of attorney document (for focal point): This is a letter/document issued by the company (owner) stating the focal point that has been assigned.
- Network coverage: this is a map showing the network coverage of the system (eg: power distribution network coverage, water distribution network coverage, sewer network coverage etc.). This document is required only for resorts that do not have an as-built document approved.
- Commissioning report: This is the end product document during the commissioning phase of a facility. This document is required only for newly developed resorts and not required for currently operational resorts.

| Annex 3 | 3 ޖަދުވަލު |
|--|---|
| Part 1: Documents to be submitted for Temporary license and New Applications | 1 ވަނަ ބައި: ވަގުޅު ވަޅުދަނޑު ލިޔެކިޔުންތަކާ ގުޅިގެން ލިޔެކިޔުންތަކުގެ ފަންޖަރު |
| Operators (Name, ID No, Designation, qualification) – minimum 4 operators with minimum C3 certification. | އެޅޭނެ ލިޔުން (ނަންމު، އި.އ.ޖ.، ހަދަނީ، ލިޔުން، ސަރުކާރު، ޕްރޮފެޝަނަލް، ވަނަ ބައި) - ލިޔެކިޔުންތަކުގެ ނިންމުމުގައި C3 ސެޓިފިކޭޝަން ލިބިފައިވާ 4 ފަންޖަރު ލިޔެކިޔުންތަކުގެ ފަންޖަރު. |
| List of Safety Equipment | ސަލާމަތުގެ ޖެނެރަލް ލިޔެކިޔުންތަކުގެ ލިސްޓް |
| Part 2A: Documents for Power systems: | 2 ވަނަ ބައި A: ރަޔަވަތުގެ ސަރަޙައްދުގެ ލިޔެކިޔުންތަކުގެ ފަންޖަރު ލިޔެކިޔުންތަކުގެ ފަންޖަރު |
| Power testing and maintenance equipment list | ސަލާމަތުގެ ޖެނެރަލް ލިޔެކިޔުންތަކުގެ ލިސްޓް ލިޔެކިޔުންތަކުގެ ލިސްޓް ލިޔެކިޔުންތަކުގެ ލިސްޓް |
| Part 2B: Documents for Water and Sewerage systems | 2 ވަނަ ބައި B: ފެން ފެނުމުގެ ސަރަޙައްދުގެ ލިޔެކިޔުންތަކުގެ ފަންޖަރު ލިޔެކިޔުންތަކުގެ ފަންޖަރު |
| Water Quality test reports | ފެން ފެނުމުގެ ލިޔެކިޔުންތަކުގެ ލިސްޓް ލިޔެކިޔުންތަކުގެ ލިސްޓް |
| Wastewater quality test reports | ފެން ފެނުމުގެ ލިޔެކިޔުންތަކުގެ ލިސްޓް ލިޔެކިޔުންތަކުގެ ލިސްޓް |
| Please refer to Annex 5 for above mentioned testing parameters | ފެން ފެނުމުގެ ލިޔެކިޔުންތަކުގެ ލިސްޓް ލިޔެކިޔުންތަކުގެ ލިސްޓް ލިޔެކިޔުންތަކުގެ ލިސްޓް |
| Water and sewerage laboratory equipment list | ފެން ފެނުމުގެ ލިޔެކިޔުންތަކުގެ ލިސްޓް ލިޔެކިޔުންތަކުގެ ލިސްޓް |
| Equipment should cover testing requirement stated in Annex 5 | ލިޔެކިޔުންތަކުގެ ލިސްޓް ލިޔެކިޔުންތަކުގެ ލިސްޓް ލިޔެކިޔުންތަކުގެ ލިސްޓް |
| If laboratory is not established, commitment to carry out the required tests (by other means) should be provided in the form of a letter | ލިޔެކިޔުންތަކުގެ ލިސްޓް ލިޔެކިޔުންތަކުގެ ލިސްޓް ލިޔެކިޔުންތަކުގެ ލިސްޓް |

Parts 1 and 2 of Annex 3 covers documents to be submitted for a temporary license application.

- For all temporary license applications, the following documents are required.
 1. Operators: A minimum of 4 operators are required for a temporary license with a minimum qualification of C3 certification. This list can include engineers and other technical staff in the operating company.
 2. List of safety equipment: this is a list of work safety equipment that the facility have for their staff such as personal protection equipment, harness, etc.
- Part 2A covers documents required for a temporary license application to operate a power system
 1. Power testing and maintenance equipment list: this a list of measuring devices and devices used for maintenance such as multimeter, ammeter, equipment used for distribution box installation etc.
- Part 2B covers documents required for a temporary license application to operate a water and/or sewerage system

Annex 4A and 4B – these sections include the Commissioning report template for both water and sewerage systems. This document is required for newly developed resorts and is not required for currently operational resorts. If applicable the applicant can use their own format as long as the identified fields in the template are shown.

Annex 5 covers the water and wastewater testing parameters and their allowed ranges.

Annex 6 covers the fees for facility registration. The fees stated in the annex are for each facility being registered.

Annex 7 covers the fees for operating license. The fees are stated per year and is to be multiplied with the number of years the operating license is applied to be obtained.

CHAPTER 3: SUBMISSION OF APPLICATIONS

- All applications can be submitted over the counter during official hours or online by emailing to secretariat@ura.gov.mv. The applications submitted online after official hours each day will be entered the next working day.
 - For online application cases where files cannot be attached due to its size, the file(s) can be uploaded to a cloud service (Eg: Google Drive, One Drive, etc.) and link shared with the email.
 - For applications where links are provided, the link(s) shall be valid for at least 30 days. And must have guest access for the duration.
 - For over-the-counter submissions a digital copy of the application shall be provided on a storage device along with the application.
- A notification of acknowledgement will be sent to each application.

CHAPTER 4: PROCESS OF REGISTRATION OF FACILITIES.

- Once the application is processed and if the application meets the criteria for a facility registration an email will be sent to the applicant with the following details to complete the payment
 - Application type:
 - Reference No.
 - Amount due (fees for the facility registration are also mentioned of the application form)
- The applicant can make the payment through Bandeyri Portal and email the receipt to the Authority.
- Once the payment is made, facility registration document will be issued by email to the Applicant.

Note: an inspection is not mandatory for facility registration applications. If all documents are submitted, Authority can issue a facility registration document once the fees are paid.

CHAPTER 5: PROCESS OF LICENSING

CHAPTER 5.1: General information:

- There are two types of Utility Operating License for each sector (Energy, Water and Sewerage)

- Temporary Operating License (TOL)
- Permanent Operating License (POL)

CHAPTER 5.2: Criteria for TOL:

- TOL is issued if the application is for a temporary operating license **OR** if the facility does not comply with the requirements for Permanent Operating License.
- The required documents for TOL are listed on the application forms “Application for Utility Service Facility Registration and Operating License for Resorts” (GEN03).
- Maximum License period is 1 (one) year.
- If the Licensee is unable to comply with the requirements for Permanent Operating License within the 1-year of the TOL period, then the Licensee can apply for an extension of the TOL.
- Any TOL issued can be extended multiple times if required. An application form must be submitted for each extension and each extension will be granted a maximum of 1 (one) year. The annual fee stated in the regulation and the application form will be charged for each temporary license extension.

CHAPTER 5.3: Criteria for POL:

- POL is issued when the facility fully complies with all the pre-requisites for Permanent Operating License.
- Minimum License period is 5 years
- Maximum License period is 10 years

CHAPTER 5.4: Processing TOL applications.

- Once the application is processed and if the application meets the criteria for a TOL an email will be sent to the applicant with the following details to complete the payment
 - Application type
 - Reference No.
 - Amount due (fees for the TOL are also mentioned of the application form)
- The applicant can make the payment through Bandeyri Portal and email the receipt to the Authority.
- Once the payment is made, a TOL will be issued by email to the Applicant.
- The terms and conditions for the license will be attached with the license issued to the applicant.
- Note: An inspection is not mandatory for TOL applications. If all documents are submitted, Authority can issue a TOL once the licensing fees are paid.

CHAPTER 5.5: Processing POL applications.

- If the application is complete then URA will inform the Applicant an Inspection date within 5 days of POL submission.
- Inspection of the facility is mandatory for all POL applications.
- Before the POL Inspection visit by URA the Applicant should ensure that all the necessary requirements (mentioned in section 3 and 4) are ready onsite.
- Refer to Annex XX-XX for onsite requirements of each type of facility.
- Refer to Annex XX-XX for pre-requisite checklists for the applicant’s convenience.
- Ensure all items on the checklist are available during inspection for a more streamlined inspection.

- Note: if it was found during the inspection that the pre-requisites for POL are not met, a TOL will be issued to the facility instead.
- Once the inspection is completed and if the application meets the criteria for a POL or TOL an email will be sent to the applicant with the following details to complete the payment
 - Application type
 - License type
 - License duration
 - Reference No.
 - Amount due (fees for the POL are also mentioned of the application form)
- The applicant can make the payment through Bandeyri Portal and email the receipt to the Authority.
- Once the payment made is confirmed, the license will be issued by email to the Applicant.
- The terms and conditions for the license will be attached with the license issued to the applicant.

ANNEX 1 – ONSITE REQUIREMENTS

This annex covers the onsite requirements for when the inspection takes place under a POL application for each type of facility.

1. Onsite requirements for a POL of a Water Supply System
 - i. As-built drawings (updated)
 - ii. Network Pressure test (minimum from 3 locations)
 - iii. Designated Sampling Point (DSP) locations.
 - iv. 6 Operators with certification (should have 1 be certified lab technician among the 6 operator)
 - v. Health and Safety Manual
 - vi. Operation and Maintenance manual
 - vii. Emergency Response Plan
 - viii. Safety equipment
 - ix. Spare parts list
 - x. Chemical storage space
 - xi. Customer service office
 - xii. Complain Handling Mechanism (CHM)
 - xiii. Water testing Laboratory setup (if applicable where the resort opted for inhouse testing facility)
 - xiv. Water test reports (should comply with the supply water standard)
 - xv. Outfall inspection (visual inspection)
 - xvi. Daily/monthly data log sheets
 - xvii. Fire safety inspection letter
2. Onsite requirements for a POL of a Sewerage System
 - i. As-built drawings (updated)
 - ii. Sewer pump specifications (brand and capacity)
 - iii. Ground water sampling point for Pumping stations
 - iv. Boundary walls for pump stations

- v. 6 Operators with certification (should have 1 be certified lab technician among the 6 operator)
 - vi. Health and Safety Manual
 - vii. Operation and Maintenance manual
 - viii. Emergency Response Plan
 - ix. Safety equipment
 - x. Spare parts list
 - xi. Customer service office
 - xii. Complain Handling Mechanism (CHM)
 - xiii. Wastewater testing Laboratory setup
 - xiv. Wastewater test reports (should comply with the wastewater discharge standard)
 - xv. Outfall inspection (visual inspection)
 - xvi. Daily/monthly data log sheets
 - xvii. Fire safety inspection letter
3. Onsite requirements for POL of a Power System
- i. As-built drawings (updated)
 - ii. 6 Operators with certification
 - iii. Health and Safety Manual
 - iv. Operation and Maintenance manual
 - v. Emergency Response Plan
 - vi. Safety equipment list
 - vii. Spare parts list
 - viii. Maintenance log sheets
 - ix. Daily/monthly data log sheets
 - x. Customer service office
 - xi. Complain Handling Mechanism (CHM)
 - xii. Fire safety inspection letter

ANNEX 2- PRE-REQUISITE CHECKLIST FOR WATER SYSTEM PERMANENT OPERATING LICENSE

| No | Check | Description |
|----|--------------------------|---|
| 1 | <input type="checkbox"/> | As-built drawings (updated) |
| 2 | <input type="checkbox"/> | Network Pressure test (minimum from 3 locations) |
| 3 | <input type="checkbox"/> | Designated Sampling Point (DSP) locations. |
| 4 | <input type="checkbox"/> | 6 Operators with certification (should have 1 be certified lab technician among the |
| 5 | <input type="checkbox"/> | Health and Safety Manual |
| 6 | <input type="checkbox"/> | Operation and Maintenance manual |
| 7 | <input type="checkbox"/> | Emergency Response Plan |
| 8 | <input type="checkbox"/> | Safety equipment |
| 9 | <input type="checkbox"/> | Spare parts list |
| 10 | <input type="checkbox"/> | Chemical storage space |
| 11 | <input type="checkbox"/> | Customer service office |
| 12 | <input type="checkbox"/> | Complain Handling Mechanism (CHM) |
| 13 | <input type="checkbox"/> | Water testing Laboratory setup |
| 14 | <input type="checkbox"/> | Water test reports (should comply with the supply water standard) |
| 15 | <input type="checkbox"/> | Outfall inspection (visual) |
| 16 | <input type="checkbox"/> | Fire safety inspection letter |

ANNEX 3- Pre-requisite checklist for Sewer system Permanent Operating License

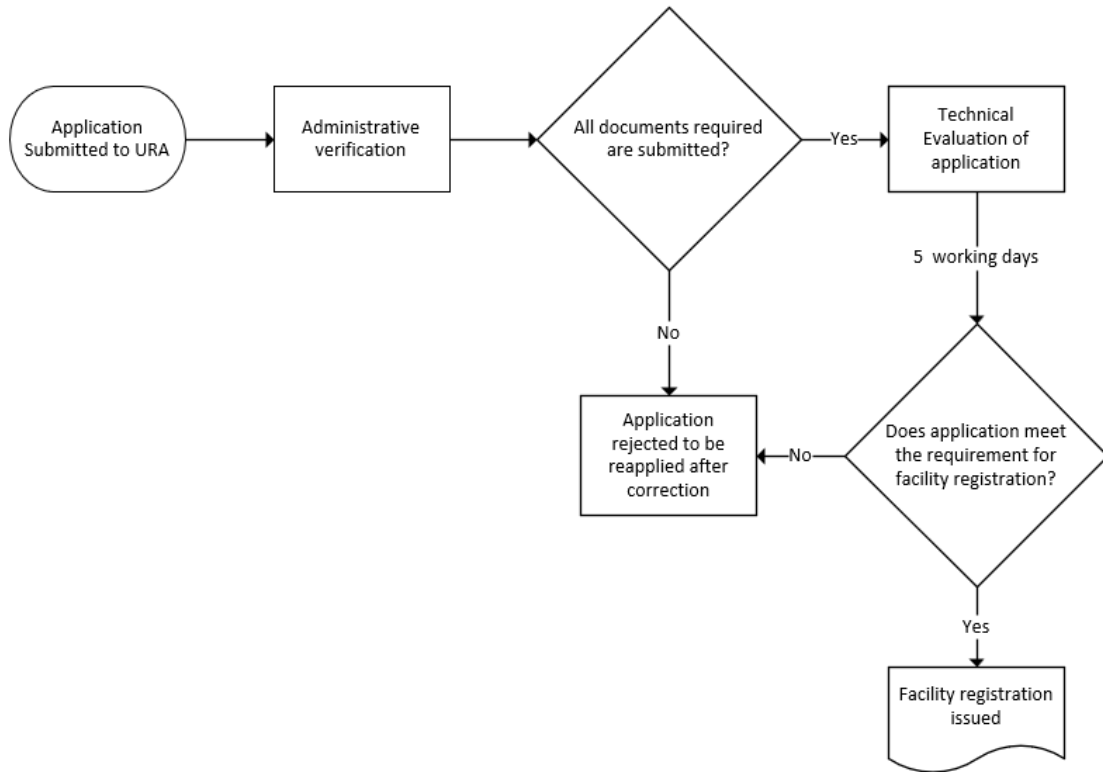
| No | Check | Description |
|----|--------------------------|---|
| 1 | <input type="checkbox"/> | As-built drawings (updated) |
| 2 | <input type="checkbox"/> | Sewer pump specs (brand and capacity) |
| 3 | <input type="checkbox"/> | Ground water sampling point for Pumping stations |
| 5 | <input type="checkbox"/> | Boundary walls for pump stations |
| 6 | <input type="checkbox"/> | 6 Operators with certification (should have 1 be certified lab technician among the 6 operator) |
| 7 | <input type="checkbox"/> | Health and Safety Manual |
| 8 | <input type="checkbox"/> | Operation and Maintenance manual |
| 9 | <input type="checkbox"/> | Emergency Response Plan |
| 10 | <input type="checkbox"/> | Safety equipment |
| 11 | <input type="checkbox"/> | Spare parts list |
| 12 | <input type="checkbox"/> | Customer service office |
| 13 | <input type="checkbox"/> | Complain Handling Mechanism (CHM) |
| 14 | <input type="checkbox"/> | Wastewater testing Laboratory setup |
| 15 | <input type="checkbox"/> | Wastewater test reports (should comply with the supply water standard) |
| 16 | <input type="checkbox"/> | Outfall inspection |
| 17 | <input type="checkbox"/> | Fire safety inspection letter |

ANNEX 4- Pre-requisite checklist for Power system Permanent Operating License

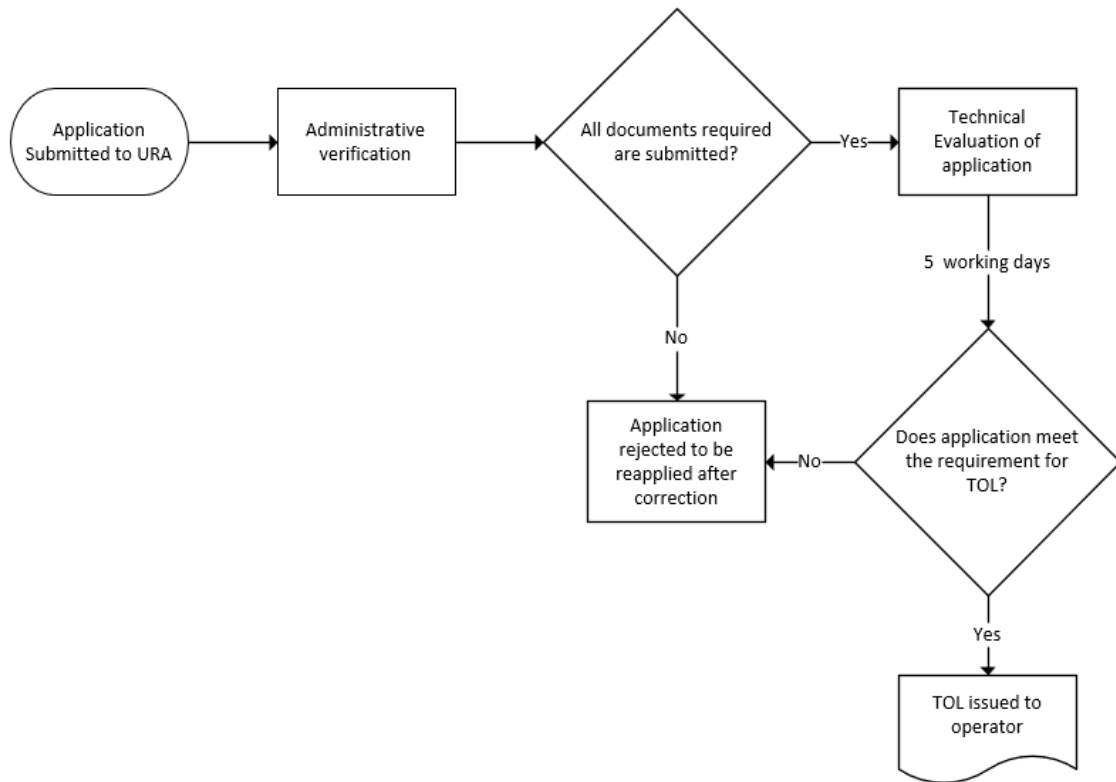
| No | Check | Description |
|----|--------------------------|-----------------------------------|
| 1 | <input type="checkbox"/> | As-built drawings (updated) |
| 2 | <input type="checkbox"/> | 6 Operators with certification |
| 3 | <input type="checkbox"/> | Health and Safety Manual |
| 4 | <input type="checkbox"/> | Operation and Maintenance manual |
| 5 | <input type="checkbox"/> | Emergency Response Plan |
| 6 | <input type="checkbox"/> | Safety equipment list |
| 7 | <input type="checkbox"/> | Spare parts list |
| 8 | <input type="checkbox"/> | Maintenance log sheets |
| 9 | <input type="checkbox"/> | Daily/monthly data log sheets |
| 10 | <input type="checkbox"/> | Customer service office |
| 11 | <input type="checkbox"/> | Complain Handling Mechanism (CHM) |
| 12 | <input type="checkbox"/> | Fire safety inspection letter |

ANNEX 5- PROCESS FLOW FOR UTILITY SERVICES FACILITY REGISTRATION AND OPERATING LICENSE APPLICATIONS

Annex 5.1 – Facility Registration



Annex 5.2 – TOL Application



Annex 5.3 – POL Application

