



COL·LEGI OFICIAL  
D'ARQUITECTES  
ILLES BALEARS

[www.coaib.es](http://www.coaib.es)

#### APPROVAL

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## NOTE – COMMISSION<sup>1</sup>

### PLACE AND DATE

In \_\_\_\_\_, on the \_\_\_\_\_ of \_\_\_\_\_

### PARTIES TO THE CONTRACT

#### THE CLIENT

|                            |           |              |          |
|----------------------------|-----------|--------------|----------|
| Name                       |           | Tax Code/NIE |          |
| Address                    |           |              |          |
| Postcode                   | Town/City |              | Province |
| Tel.                       |           | Fax          |          |
| Represented by Mr./Ms.     |           |              |          |
| Identity Card/Passport No. |           | Nationality  |          |
| Position                   |           |              |          |
| Notary                     |           |              |          |
| Powers of attorney ref.    |           | Date         |          |

#### Commissions the architect/s

##### ARCHITECT/S<sup>2</sup>

| College Membership No. | COAIB Code | Name of Individual/Company <sup>3</sup> |
|------------------------|------------|---|
|                        |            |   |
|                        |            |   |

### OBJECT OF THE COMMISSION

|                               |                      |
|-------------------------------|----------------------|
| <b>TYPE OF JOB/PHASE:</b>     |                      |
|                               |                      |
| <b>LOCATION:</b>              |                      |
|                               | Plot                 |
| Town/Estate                   | Area                 |
| Municipality                  |                      |
| <b>TOWN PLANNING DETAILS:</b> |                      |
| Planning                      |                      |
| Date of final approval        |                      |
| Land classification           | Surface area of plot |
| Minimum plot                  | Comments             |
| Use                           |                      |
| Volume                        |                      |
| Height                        |                      |
| Setback limits                |                      |
| Floor area ratio              |                      |
| <b>TECHNICAL CONDITIONS:</b>  |                      |
| Preliminary budget:           |                      |
| Approximate area:             |                      |
| Other:                        |                      |

<sup>1</sup> Model to be adapted by the parties to the contract depending on the particular features of each commission. Any translations into English, German and French are for informative purposes only and are not binding.

<sup>2</sup> Extent of participation in collaborative projects.

<sup>3</sup> Architectural companies should also provide the name of the Architect designing/managing the work.

| <b>FEES AND PAYMENT TERMS<sup>1</sup></b>   |            |
|---|------------|
| Fees:   |            |
| Payment terms:  |            |
| Payment address: <sup>2</sup>   |            |
| Provision of funds:   |            |
| <b>DELIVERY OF THE WORK</b>   |            |
| Period:   |            |
| Location:   |            |
| <b>OTHER CONDITIONS AGREED</b>  |            |
| <p>1. The amount charged for services provided by the college to process documentation required by the approval will be paid by:</p> <p>2. The client has been informed that the Architect <input type="checkbox"/> <b>will</b> <input type="checkbox"/> <b>will not</b> authorise the Official College of Architects of the Balearic Islands (Col·legi Oficial d'Arquitectes de les Illes Balears) to manage payment of the fees resulting from this contract.</p> <p>3. To resolve any differences that may arise from the interpretation or fulfilment of this contract, both parties submit themselves to the Courts corresponding to the COAIB branch where the work being commissioned must be officially approved, waiving any other jurisdiction.</p> <p>4. Pursuant to Royal Decree 1627/97 of 24.10.97, the Client appoints the Architect as:</p> <p style="margin-left: 40px;"><input type="checkbox"/> Health &amp; Safety Coordinator while the building plan is being drawn up.</p> <p style="margin-left: 40px;"><input type="checkbox"/> Health &amp; Safety Coordinator while the construction work is being carried out.</p> <p>5. Pursuant to Royal Decree 1627/97 of 24.10.97, the Client commissions the Architect to carry out the following:</p> <p style="margin-left: 40px;"><input type="checkbox"/> Basic Health &amp; Safety Study</p> <p style="margin-left: 40px;"><input type="checkbox"/> Health &amp; Safety Study</p> <p style="margin-left: 40px;">agreeing the following fees</p> <p>6. Other</p> |            |
| <b>SIGNATURES OF THE PARTIES TO THE CONTRACT</b>  |            |
| The Architect/s   | The Client |

<sup>1</sup> Mark the option agreed in the corresponding box.

<sup>2</sup> If the COAIB is responsible for managing payment, the address for the payment and delivery of the work will be that of the Branch where these have been approved.