AP - 03

ONE STOP UNIT - UDA

"Let's Develop Our Country Together"

Building Application

Urban Development Authority
Ministry of Urban Development & Housing

Front Desk (Office Use Only)

File Details		
File Number		
Applicant's Name	Rev/Mr. /Mrs./Miss.	
NIC/Company Registration Number		
Contact Numbers	Mobile Number	
	WhatsApp Number	
	Telephone Number	
Email Address		
Postal Address		
Postal Code		
Date of Received		

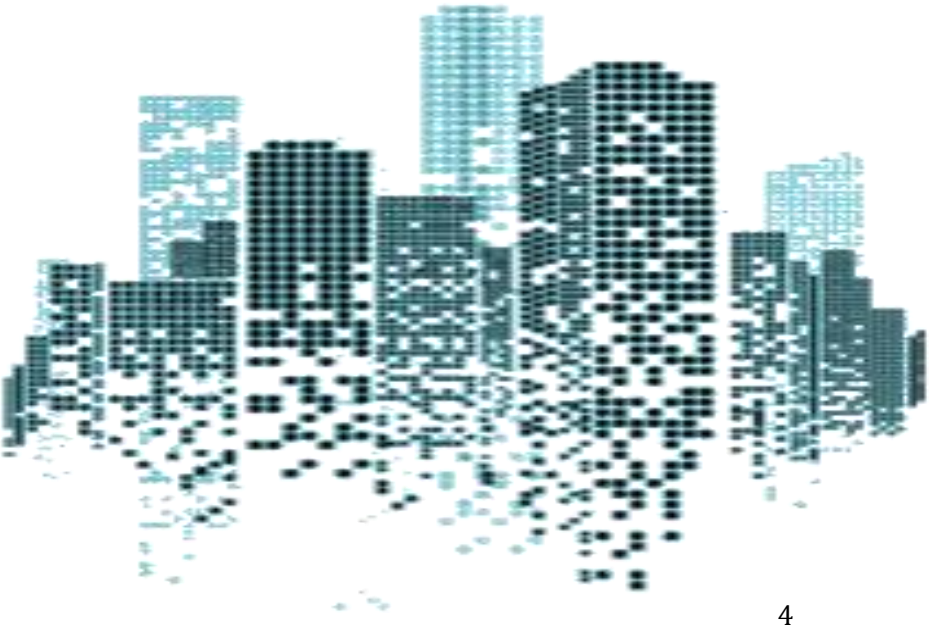
Provincial, District & Sub Offices Details	
Provincial, District & Sub Office Name	
Cluster head	
Enforcement planner	
Clerk	

Payment Details				
Initial Payment (Rs)	Payment Mode	Branch	Date	Payment Slip Number
	Online / Bank / OSU Counter			

Additional Remarks

Section I

Building Application



File No:	**Check List for Building Application**			**Office Use**
No	**Description**		**Applicant Response**	**Front Desk Officer Remarks**
1	Dully filled E-Application			
2	Signed Declaration forms of (a) Applicant/s			
	(b) Owner/s (If the Applicant isn't the owner of the land)			
	(c) Qualified Persons	Charted Engineer (Civil / Structural)		
		Charted Architect		
		Service Engineer (MEP)		
3	If the Applicant is not the owner of the land, consent letter from owner of the land & power of attorney			
4	Copy of National Identity Card (Applicant & Owner) / Business Registration Certificate (If the Applicant is a company or any other organization)			
5	04 Copies of Drawings with Signatures (if CMC 06 copies) (if Parliament Area 05 Copies)	Applicant/s		
		Charted Engineer		
		Charted Architect		
6	Ownership Document	Copy of Deed / Court Decision		
		Title Certificate (If available)		
		Non-vesting Certificate (If available)		
		Ownership Certificate (If available)		
7	Location (Drawing or Google Map)			
8	If Amendment or Extension to an Existing Building	- Approved Building Plans		
		- Certificate of Conformity		
9	A copy of approved survey plan			
10	Letter issued by relevant local authority for Existing Lot (If applicable)			
11	Payment Slip (Building Application Processing Fee) Bank Deposit Slip / Counter Payment Slip (PIV) / Online card Payment	**Paid Amount** **Rs.**		
12	Payment Receipt of Assessment Rates (Relevant Year)			
13	Street Line Certificate			
14	Building Line Certificate			
15	Water Supply & Drainage Clearance			
16	Letter of Indemnity Form for Construction			
17	Insurance Policy	Buildings Under Construction		
		Undertaking Letter for Insurance Policy (Proposed Building)		
18	Undertaking Letters	Undertaking Letter for Building services	Structural stability	
			AC/ mechanical Ventilation	
			Elevator	
			Generator	
			Swimming pool	
			MEP Services	
		Undertaking Letter for Disable Facilities (From Developer/ Owner)		
19	Clearances if available			
20	Other	Deed of Gift for Street Line (If Relevant)		

Application Submitted by					
Name		**Relation to the Property Owner**		**NIC / Company Registration Number**	

Application Receiving by							
Name		**Designation**		**Signature**		**Date**	

One Stop Unit
Urban Development Authority
Ground Floor, Sethsiripaya Stage 01, Battaramulla
Telephone/ - +94 112 875 916 - 920 / +94 112 873 644 / +94 112 875 333 / +94113 883 251

File No:	**Check List for Building Application**			**Office Use**
No	**Description**		**Applicant Response**	**Front Desk Officer Remarks**
1	Dully filled E-Application			
2	Signed Declaration forms of (a) Applicant/s			
	(b) Owner/s (If the Applicant isn't the owner of the land)			
	(c) Qualified Persons	Charted Engineer (Civil / Structural)		
		Charted Architect		
		Service Engineer (MEP)		
3	If the Applicant is not the owner of the land, consent letter from owner of the land & power of attorney			
4	Copy of National Identity Card (Applicant & Owner) / Business Registration Certificate (If the Applicant is a company or any other organization)			
5	04 Copies of Drawings with Signatures (if CMC 06 copies) (if Parliament Area 05 Copies)	Applicant/s		
		Charted Engineer		
		Charted Architect		
6	Ownership Document	Copy of Deed / Court Decision		
		Title Certificate (If available)		
		Non-vesting Certificate (If available)		
		Ownership Certificate (If available)		
7	Location (Drawing or Google Map)			
8	If Amendment or Extension to an Existing Building	- Approved Building Plans		
		- Certificate of Conformity		
9	A copy of approved survey plan			
10	Letter issued by relevant local authority for Existing Lot (If applicable)			
11	Payment Slip (Building Application Processing Fee) Bank Deposit Slip / Counter Payment Slip (PIV) / Online card Payment	**Paid Amount** **Rs.**		
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15	Water Supply & Drainage Clearance			
16	Letter of Indemnity Form for Construction			
17	Insurance Policy	Buildings Under Construction		
		Undertaking Letter for Insurance Policy (Proposed Building)		
18	Undertaking Letters	Undertaking Letter for Building services	Structural stability	
			AC/ mechanical Ventilation	
			Elevator	
			Generator	
			Swimming pool	
			MEP Services	
		Undertaking Letter for Disable Facilities (From Developer/ Owner)		
19	Clearances if available			
20	Other	Deed of Gift for Street Line (If Relevant)		

Application Submitted by					
Name		**Relation to the Property Owner**		**NIC / Company Registration Number**	

Application Receiving by							
Name		**Designation**		**Signature**		**Date**	

Building Application

1. Nature of Approval						
Applicant Use			Office Use Only			
Description	Applicant's Response		Enforcement Officer Review	Enforcement Officer Remarks	Cluster head Review	Cluster head Remarks
1.1 Previous Application No (PPC) If Available						
1.2 Nature of the Development (Use "√" mark)	New Development					
	Amendment					
If Amendment 1.2.1 Type of Amendment	Addition / Alteration/ Extension					
1.2.2 Approved permit No						
1.2.3 Date						

2. Applicant's Information					
Applicant Use		Office Use Only			
Description	Applicant's Response	Enforcement Officer Review	Enforcement Officer Remarks	Cluster head Review	Cluster head Remarks
2.1 Name of the Applicant	Rev/Mr. /Mrs./Miss.				
2.2 Address					
2.3 NIC / Company Registration Number					
2.4 Contact number					
2.5 Email					
2nd Applicant (If applicable)	Applicant's Response	Enforcement Officer Review	Enforcement Officer Remarks	Cluster head Review	Cluster head Remarks
2.1 Name of the applicant	Rev/Mr. /Mrs./Miss.				
2.2 Address					
2.3 NIC / Company Registration Number					
2.4 Contact number					
2.5 Email					

3. Details of Property Owner					
Applicant Use		**Office Use Only**			
Description	**Applicant's Response**	**Enforcement Officer Review**	**Enforcement Officer Remarks**	**Cluster Head Review**	**Cluster Head Remarks**
3.1 Name of the Owner/ Company	Rev/Mr. /Mrs./Miss.				
3.2 NIC Number/ Company Registration Number					
3.3 Contact Number					
3.4 Email Address					
3.5 VAT Registered Number					
3.6 Type of Ownership (Use "√" mark)	Free Hold				
	Lease Hold				
	Power of attorney				
	Other (Please Specify)				
3.7 Deed Number					
3.7.1 Registered Date					
3.7.2 Name of the Notary public					
2nd Owner (if Applicable)	**Applicant's Response**	**Enforcement Officer Review**	**Enforcement Officer Remarks**	**Cluster Head Review**	**Cluster Head Remarks**
3.1 Name of the Owner/Company	Rev/Mr. /Mrs./Miss.				
3.2 NIC Number/ Company Registration Number					
3.3 Contact Number					
3.4 Email Address					
3.5 VAT Registered Number					
3.6 Type of Ownership (Use "√" mark)	Free Hold				
	Lease Hold				
	Power of attorney				
	Other (Please Specify)				
3.7 Deed Number					
3.7.1 Registered Date					
3.7.2 Name of the Notary public					

4. Site Details						
Applicant Use			**Office Use Only**			
Description	**Applicant's Response**		**Enforcement Officer Review**	**Enforcement Officer Remarks**	**Cluster Head Review**	**Cluster Head Remarks**
4.1 Address of the site						
4.2 Name of the land						
4.3 Assessment Number						
4.4 Province						
4.5 District						
4.6 Divisional Secretary Area						
4.7 Ward/GND Name						
4.8 Ward/GND Number						
4.9 Local Authority						
4.10 Development Area (Only applicable for Kaduwela MC, Sri Jayewardenapura Kotte MC & Maharagama UC applicants)	Parliament Area					
	Out of the Parliament Area					
4.11 Land Extent	…….. A …….R …….P (……..**m²**)					
4.12 Survey plan number						
4.12.1 Lot number						
4.12.2 Surveyor's Name						
4.12.3 Surveyed Date						
4.12.4 Approved number						
4.12.5 Approved Date						
4.12.6 Approved Use						

Applicant Use					Office Use Only			
Description		**Applicant's Response**			**Enforcement Officer Review**	**Enforcement Officer Remarks**	**Cluster Head Review**	**Cluster Head Remarks**
4.13 Nature of the site		Bare Land/Constructed/Sloppy Land/Cultivated/other						
4.13.1 Please specify, if other								
4.13.2 details of the Existing Buildings (if constructed)		**Building 1**	**Building 2**	**Building 3**				
Use								
No of floors								
Floor area (Sq.m)								
Building Height (m)								
Plot coverage (%)								
Condition of the Building (Good/Moderate/Abandoned)								
4.14 Boundary of the Site *As mentioned in the Survey Plan	**North**							
	East							
	South							
	West							
4.15 Available Amenities	**Water supply (Yes/No)**							
	Electricity supply (Yes/No)							
	Sewerage Disposal (Yes/No)							
	Solid Waste disposal (Yes/No)							
	Other							

5. Proposed Development				Permissible Development			
Applicant Use				Office Use Only			
Description	Applicant's Response			Enforcement Officer Review	Enforcement Officer Remarks	Cluster head Review	Cluster head Remarks
5.1 Proposed use							
5.2 Development Zone							
5.3 Access Roads	Road 01	Road 02	Road 03				
5.3.1 Road Ownership Type (RDA / PRDA /Local Authority /Private)							
5.3.2 Road Name							
5.3.3 Building Line (m)							
5.3.4 Street Line (m)							
5.3.5 Road Width (m)							
5.4 Site Frontage (m)							
5.5 Minimum Land Extent							
5.6 Height of Building (m)							
5.7 Minimum Height of Floor (m)							
5.8 Maximum Plot Coverage (%)							
5.9 Maximum FAR							
5.10 Maximum No of Floors							
5.11 No of Units, if Residential use							
5.12 Rear Space (m)							
5.13 Side space (m)							
5.14 Basement Side space (m)							
5.15 Parking (Count)							
5.16 Disable parking (Count)							
5.17 Reservations (If Applicable)							
5.17.1 Reservation Type							
5.17.2 Reservation Width (m)							

6. Floor area Details								
Applicant Use					Office Use Only			
Floor level	Applicant's Response				Enforcement Officer Review	Enforcement Officer Remarks	Cluster head Review	Cluster head Remarks
	Use of the floor	Floor Height(m)	Net Floor area (m^2)	Gross Floor Area (m^2)				

Floor level	Applicant's Response				Enforcement Officer Review	Enforcement Officer Remarks	Cluster head Review	Cluster head Remarks
	Use of the floor	Floor Height(m)	Net Floor area (m^2)	Gross Floor Area (m^2)				
If more than above please attach separate sheet								
Total								

7. Other Requirements					
Applicant Use		Office Use Only			
Description	Applicant's Response	Enforcement Officer Review	Enforcement Officer Remarks	Cluster head Review	Cluster head Remarks
7.1 Signature of the architect (Yes/No)					
7.2 Signature of the engineer (Yes/No)					
7.3 Signature of the owner (Yes/No)					
7.4 Title of the drawing (Yes/No)					
7.5 Addressed of the drawing (Yes/No)					
7.6 Disable access (Yes/No)					
7.7 Disable Facilities (Toilets) (Yes/No)					
7.8 Fire Requirements (Yes/No)					
7.9 Lighting & Ventilation Requirements (Yes/No)					
7.10 Type of Mechanical Ventilation (Central/ Split)					
7.11 Space for generator (Yes/No)					
7.12 Space for transformer (Yes/No)					
7.13 Requirements for driveway (Yes/No)					
7.14 Space for Elevator (Yes/No)					
7.15 Space for Rainwater Harvesting (Yes/No)					
7.16 Space for solid waste management (Yes/No)					
7.17 Storm water system (Yes/No)					
7.18 Septic/ Sewerage system (Yes/No)					
7.19 Road widening (if applicable) (Yes/No)					

8. Required Documents							
Applicant Use				Office Use Only			
Document		Applicant's Response		Enforcement Officer Review	Enforcement Officer Remarks	Cluster head Review	Cluster head Remarks
		Number (if any)	Date				
8.1 Ownership Documents							
8.2 Copy of NIC / Company Registration							
8.3 Approved Survey Plan or Existing Lot letter							
8.4 Letter of indemnity							
8.5 Insurance policy							
8.6 Deed of gift for street line							
8.7 Assessment Payment Receipt							
8.8 Declaration	Owner						
	Applicant						
	Architect						
	Engineer						
8.9 Architectural drawings							
8.10 Street/ BL Line Certificate							
8.11 Development proposal							
8.12 Copy approved plans (If any)							
8.13 COC of existing buildings							
8.14 Undertaking Letters for Building Services,	Structural Stability						
	Elevator						
	Generator						
	Mechanical Ventilation						
	Swimming pool						
	Rainwater Harvesting						
	MEP Services						
8.15 Undertaking Letter for Disable Facilities							
8.16 If Other							

9. Available clearances						
Applicant Use			Office Use Only			
Clearances	Applicant's Response		Enforcement Officer Review	Enforcement Officer Remarks	Cluster head Review	Cluster head Remarks
	Number (if any)	Date				
1. Preliminary Planning Clearance from **UDA**						
2. Fire clearance from **Fire Services Department**						
3. Sewerage & storm water clearance from **Water supply & Drainage division of CMC**						
4. Solid waste management clearance from **Solid waste management division of CMC**						
5. Security clearance from **Ministry of Defense**						
6. Water Supply & Drainage Line clearance from **National Water Supply & Drainage Board**						
7. Clearance from **Coast Conservation & Coastal Resource Management Department**						
8. Clearance from **National Building Research Organization**						
9. Environmental Recommendation/ EIA/IEE Approval from **Central Environmental Authority**						
10. Height Clearance from **Civil Aviation Authority**						
11. Electricity Supply & line clearance from **Ceylon Electricity Board/LECO**						
12. Clearance from **Condominium Management Authority**						
13. Security clearance from **Sri Lanka Parliament**						
14. Fragmentation clearance from **Tea Rubber & coconut (Fragmentation control) Board**						

Clearances	Applicant's Response		Enforcement Officer Review	Enforcement Officer Remarks	Cluster head Review	Cluster head Remarks
15. Reservation Clearance from **Irrigation Department**						
16. Reservation Clearance from **CGR**						
17. Clearance from **SL Land Development Corporation**						
18. Recommendation from **Agrarian Department**						
19. TIA clearance from **UDA**						
20. Clearance from **Tourism Development Authority**						
21. Clearance from **Road Development Authority**						
22. Clearance from **Archeology Department**						
23. Forest Reservation clearances from **forest conservation Department**						
24. Clearance from **Mahaweli Development Authority**						
25. Mining License from **geological survey & mining Bureau**						
26. Clearance from **Labor department**						
27. Clearance from **Board of Investment**						
28. ECC clearance from **UDA**						
29. Solid waste clearance from **Waste Management Authority**						
30. Other						

10. Additional Comments (Applicant Use)

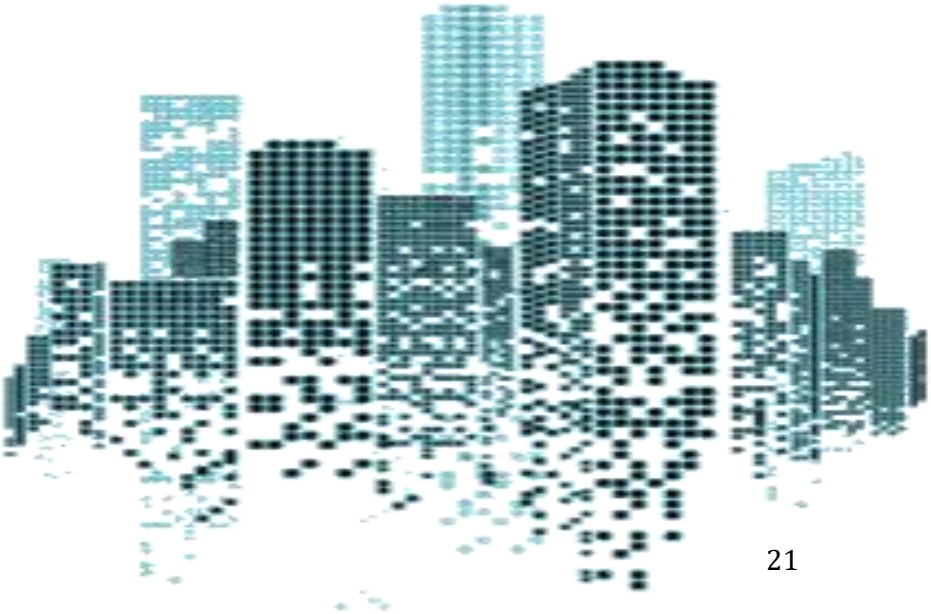
11. Qualified Persons Details				
Field	**Name of the Qualified Person**	**Institution**	**Membership Number**	**Stamp & Signature**
1. Chartered Engineer				
2. Chartered Architect				
3. Service Engineer				
4. Other QP 1				
5. Other QP 2				

12. Applicants Declaration			
I hereby certify that all information furnished by me in this application are true and accurate to the best of my knowledge I/we am/are aware that if any of the information provided by me/us is/are found to be false by the Urban Development Authority, the permit issued with regard to the development will be cancelled			
Name			
Signature			
Date			

Section II

Recommendations

(Office Use Only)



For Office Use Only

Site sketch

For Office Use Only

Enforcement Planners Recommendation			
Name		**Date**	
Designation		**Signature**	
Cluster Head Recommendations			
Name		**Date**	
Designation		**Signature**	
Director Recommendations			
Recommended/ Not Recommended to Forward to One Stop Unit ……. …… **Director** **Official Seal** **……. Provincial, District & Sub Office**			

Required Clearances for the Development

Required Clearance	Clearance Required		Date of Apply	Reference Number	Approved date	Date of Received
	Cluster Head	OSU Officer				
1. Preliminary Planning Clearance from **UDA**						
2. Fire clearance from **Fire Services Department**						
3. Sewerage & storm water clearance from **Water supply & Drainage division of CMC**						
4. Solid waste management clearance from **Solid waste management division of CMC**						
5. Security clearance from **Ministry of Defense**						
6. Water Supply & Drainage Line clearance from **National Water Supply & Drainage Board**						
7. Clearance from **Coast Conservation & Coastal Resource Management Department**						
8. Clearance from **National Building Research Organization**						
9. Environmental Recommendation/ EIA/IEE Approval from **Central Environmental Authority**						
10. Height Clearance from **Civil Aviation Authority**						
11. Electricity Supply & line clearance from **Ceylon Electricity Board/LECO**						
12. Clearance from **Condominium Management Authority**						
13. Security clearance from **Sri Lanka Parliament**						
14. Fragmentation clearance from **Tea Rubber & coconut (Fragmentation control) Board**						
15. Reservation Clearance from **Irrigation Department**						
16. Reservation Clearance from **CGR**						
17. Clearance from **SL Land Development Corporation**						
18. Recommendation from **Agrarian Department**						
19. TIA clearance from **UDA**						
20. Clearance from **Tourism Development Authority**						
21. Clearance from **Road Development Authority**						
22. Clearance from **Archeology Department**						

23. Forest Reservation clearances from **forest conservation Department**						
24. Clearance from **Mahaweli Development Authority**						
25. Mining License from **geological survey & mining Bureau**						
26. Clearance from **Labor department**						
27. Clearance from **Board of Investment**						
28. ECC clearance from **UDA**						
29. Solid waste clearance from **Waste Management Authority**						
30. If Other						

Further Clarification from Other divisions						
Division	**Clearance Required**		**Date of Apply**	**Reference Number**	**Approved date**	**Date of Received**
	Cluster Head	**OSU Officer**				
1. Northern Provincial Office						
2. North Central Provincial Office						
3. Central Provincial Office						
4. UVA Provincial Office						
5. Sabaragamuwa Provincial Office						
6. North Western Provincial Office						
7. Southern Provincial Office						
8. Western Province Division						
9. Colombo Metro Region Division						
10. Eastern Provincial Office						
11. Land Division						
12. Legal Division						
13. Project Management Division						
14. Urban Regeneration Project Division						
15. Portfolio Management Division						

Convener (OSU) Recommendations			
Name		**Date**	
Designation		**Signature**	

One Stop Planning Committee

"Scope Committee Meeting"

Meeting Number:				Date:	
No	**Name**	**Designation**	**Institution**	**Consent**	**Signature**
01					
02					
03					
04					
05					
06					
07					
08					
09					
10					
11					
12					
13					
14					
15					
16					

Reference Number	Additional Remarks

Recommended/ Not Recommended

…….. ……..

Chairman
Scope Meeting - OSU

Official Seal

One Stop Planning Committee

"Scope Committee Meeting"

Meeting Number:				Date:	
No	**Name**	**Designation**	**Institution**	**Consent**	**Signature**
01					
02					
03					
04					
05					
06					
07					
08					
09					
10					
11					
12					
13					
14					
15					
16					

Reference Number	Additional Remarks

Recommended/ Not Recommended

…….. ……..

Chairman
Scope Meeting - OSU

Official Seal

One Stop Planning Committee
"Approval Meeting"

Meeting Number	Date
Decision:	
Comments	

Approved Use		Approved Building Height (m)	
Approved Floor Area (Sq.m)		Approved Number of Floors	
Maximum FAR		Approved Plot Coverage (%)	

Committee Members

No	Name	Designation	Signature
01			
02			
03			
04			
05			
06			
07			
08			
09			
10			
11			
12			

…….. ……..

Director General/ Representative for DG Official Seal

Urban Development Authority

One Stop Planning Committee
"Approval Meeting"

Meeting Number			Date
Decision:			
Comments			
Approved Use		Approved Building Height (m)	
Approved Floor Area (Sq.m)		Approved Number of Floors	
Maximum FAR		Approved Plot Coverage (%)	

Committee Members

No	Name	Designation	Signature
01			
02			
03			
04			
05			
06			
07			
08			
09			
10			
11			
12			

…….. ……..

Director General/ Representative for DG Official Seal
Urban Development Authority

For Office Use Only (Clerk)

Fee Calculation				
Description			**Amount (Rs.)**	
Development Type	Non-Residential			
	Residential (Apartment)			
	Residential (Single Story)			
Total Floor area (Sq.m)				
Processing fee for ……sqm (Floor area…… × Rs ……)				
Processing fee for Balance Floor Area (Balance Floor area …… × $\frac{Rs\ 2000}{90m2}$)				
Total Processing fee				
Processing fee for One Stop Unit Process (Total Processing fee ×3.5)				
Add- VAT (12%)				
Add -Transport Fee (Rs 1000 + 100/- per Km)				
Total Payment				
Less- Initial Payment				
Balance fee to be Paid				
(+) Service Charge				
Floor Area (Sqm)				
Rate Per Sqm				
Service Charge				
Grant Total				
Calculated By				
Name			**Signature**	
Designation			**Date**	

Payment Details				
Balance processing fee (Rs)	**Payment Mode**	**Branch**	**Date**	**Payment Slip Number**
	Online / Bank / OSU Counter			

Application Processing Staff			
No		**Designation**	**Name**
01		Director General/ Representative for DG	
02		Director or D/D or A/D or Officer In charge in Relevant Office	
03		Deputy Director in One Stop Unit	
04		Town Planner/ Enforcement Planner /Planning Officer in Relevant Cluster	
05		Town Planner/ Enforcement Planner / Planning Officer in One Stop Unit	
06	**(i)**	Invitees from other divisions in UDA	
	(ii)	Invitees from other divisions in UDA	
07		Administrative Officer	
08		Technical Officer	
09		Draftsmen	
10		Finance Assistant	
11		Record Keeper	
12		Subject Clerk — Cluster	
		Subject Clerk — Front Desk	
13		Typist	
14		Office Aid — Cluster	
		Office Aid — Front Desk	

Certified by			
Name		**Signature**	
Designation		**Date**	

Annexures		
No	**Document**	**Reference Number**

Telephone Directory - UDA		
No	**Provincial Offices, District Offices & Sub Offices**	**Direct Telephone**
01	North Western Provincial Office – Kurunegala	**037 - 2223815**
02	North Central Provincial Office – Anuradapura	**025 - 3249789**
03	Eastern Provincial Office – Trincomalee	**026 – 2222656**
04	Northern Provincial Office – Jaffna	**021 - 3004691**
05	Central Provincial Office – Kandy	**081 – 3811326**
06	Uva Provincial Office – Badulla	**055 - 2223721**
07	Sabaragamuwa Provincial Office – Rathnapura	**045 – 3471555**
08	Southern Provincial Office – Galle	**091 – 2234830**
09	Gampaha District Office	**033 – 2223595**
10	Kalutara District Office	**034 – 2223595**
11	Puttalam District Office	**032 – 2221173**
12	Pollonnaruwa District Office	**027 – 3276127**
13	Kalmunai Sub Office	**067 – 2224250**
14	Ampara District Office	**063 – 2222411**
15	Batticaloa District Office	**065 – 2227673**
16	Nuwara Eliya District Office	**052 – 2223664**
17	Matale District Office - Dambulla	**066 – 3063414**
18	Monaragala District Office	**047 – 3220626**
19	Kataragama Sub Office	**047 – 2235343**
20	Kegalle District Office	**035 – 3220915**
21	Matara District Office	**041 – 3006160**
22	Hambanthota District Office	**047 - 2256587**

Towards a Planned, Sustained and Adored Urbanization

Urban Development Authority
Telephone/ - +94 112 875 916 - 920 / +94 112 873 644 / +94 112 875 333 /+94 113 883 251

One Stop Unit-UDA
Ground Floor, Sethsiripaya Stage 01, Battaramulla
onestopunit@uda.gov.lk
011 - 2874585 / 011 – 3883251
Whatsapp : +94 71 2076177

Deputy Director General (Planning) Zone 2 Office
ddg.zone2@gmail.com
0112862909

Extensions
Dy Director General (Planning) Zone 2 – 2410,2411,2412
Colombo Metro Region Division – 2421,2422
Western Province Division – 2453,2454,2455,2456
Colombo MC Area– 2424, 2426, 2427
SJP Kotte MC – 2423 Maharagama UC area – 2425
Dehiwala Mt. Lavinia MC & Boralesgamuwa UC Area – 2428
Kaduwela MC Area– 2429
Kolonnawa UC & Kotikawatta PS Area– 2426