



Government of the Republic of Trinidad and Tobago
Ministry of Public Administration

Application for Accommodation Form

*** Please provide an approved Organizational Chart in addition to this form when submitting this application**

Section A

Date of Request

Name of Requesting Ministry/
Agency/NGO

Name of Requesting Officer Position

Contact Information for Requesting Officer

Phone Number Extension Fax Number

Email

Section B

Type of Request Choose an item. Reason for Request Choose an item.

Current Location (if any)

1st Preference 2nd Preference

Preferred type of Property

State Owned ☐ Rental ☐ No Preference ☐

Please state your reasons

Does the requesting Ministry/Agency/NGO interact directly with the public?

Yes ☐ No ☐



PROPERTY AND REAL ESTATE SERVICES DIVISION

CIC Building Level One, 122-124 Frederick Street
Port of Spain
(868) 627-4801 (868) 625-2469
www.mpa.gov.tt

Is the requesting Ministry/Agency/NGO able to provide in-house Facility Management Services?

Yes ☐

No ☐

Please indicate the minimum number of parking spaces required

Please indicate the total area being requested in Meters Squared or feet Squared

Meters Squared

Feet Squared

Please indicate any special room requirements/facilities (indicate room capacity)

☐ Conference Room ()

☐ Huddle Room ()

☐ Visitor Lobby ()

☐ Conference Room ()

☐ Conference Room ()

☐ Training Room ()

☐ Other

Section C

Please Indicate the total number of Divisions/Units/Sections to be relocated

Please indicate the total number of staff members to be accommodated

Please lists the names of the Divisions/Units/Sections and the number of staff in each



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Once a location is identified, would you be interested in visiting the site?

☐ Yes ☐ No

Name



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