RAKGAS LLC NOC REQUEST FORM



For Instructions and list of accompanying requirements see: https://rakgas.ae/noc Complete this form and return to NOC@rakgas.ae for NOC close out form

PROJECT NAME	DAT	E			
COMPANY NAME	RAKO	GAS NOC NUMI	BER		
COMPANY ADDRESS	CONT	TRACTOR REF	ERENCE NOC N	NUMBER	
BRIEF DESCRIPTION OF WORK COMPLET	ГЕD				
CONTACT PHONE NUMBER	CONT	ACT EMAIL			
OFFICE: -					
MOBILE: -					
WORK START DATE	WORI	K END DATE			
I declare that the work covered by the RAKGAS NOC condition has been performed and is now completed/suspended. All equipment and persons have been withdrawn from site and worksite is returned to a safe, clean and tidy condition.					
Company Representative Name	Company Position / Title		Signature	Date	

Support and Telephone enquiries: +9717 2070555 (Ask for Mr. Wael Kochakji)
Technical requirements enquiries, please contact HSE focal point on +9717 2668364(Mr. Ajai/ Mr. Manoj)