



**APPLICATION FOR MEMBERSHIP**

We, the undersigned, do hereby make application for membership of the Waterproofing and Roofing Association Cape.

We hereby agree to abide by the Constitution and Rules of WARAC, to pay all due fees and levies and to offer our co-operation in the activities of WARAC to further its objectives within the limits provided by the Constitution.

We also agree to abide by the statutory requirements of the Republic of South Africa

<b><u>MEMBERSHIP FEES</u></b>	<b><u>ENTRANCE FEE</u></b>	<b><u>ANNUAL FEE</u></b>
FULL MEMBERSHIP	R2,000.00	R2,000.00

**NOTE: Entrance fee to be submitted with completed Application Form**

- Members elected during the year shall pay annual fee pro rata, calculated on a monthly basis
- Membership fees are payable immediately on membership being approved
- Members are required to attend at least 80% of general meetings annually to retain their membership



Company Name:  Form of Company

Company Registration N<sup>o</sup>:

Telephone N<sup>o</sup>:  Facsimile N<sup>o</sup>:

Email Address:  Cell N<sup>o</sup>:

Postal Address:

Postcode:

Street Address:

Postcode:

Names of Owners	<input type="text"/>	Capacity	<input type="text"/>
Names of Owners	<input type="text"/>	Capacity	<input type="text"/>
Names of Owners	<input type="text"/>	Capacity	<input type="text"/>
Names of Owners	<input type="text"/>	Capacity	<input type="text"/>
Names of Owners	<input type="text"/>	Capacity	<input type="text"/>

**Number of years the company has been manufacturing/supplying or contracting *or affiliated with***

- Flat roof waterproofing and/or roofing systems and/or materials
- Other roofing systems and/or materials:
- Affiliated to the waterproofing and/or roofing industry

**Details of types of waterproofing or roofing systems and/or materials supplied or used by your company (e.g. "torch-on", acrylics, cement tiles, metal roofing sheeting, etc.) : or affiliated interests in the waterproofing and/or roofing industry**

Number of companies workers on site



**STATUTORY REQUIREMENTS**

**Please include all supporting documents for the requirements below**

**CONTRACTOR DETAIL FORM**

Name of company: _____	Trading name:
Date of commencement of business: _____	Tel No : Fax No: Email:
Public liability insurance: Are you insured ? YES/NO	Insurance Co: Policy number: Date of policy : Cover :
Contractors liability insurance Are you insured ? YES/NO	Insurance Co: Policy number: Date of policy: Cover:
Employers liability insurance Are you insured ? YES/NO	Insurance Co: Policy number: Date of policy:
Comprehensive motor vehicle insurance Are you insured ? YES/NO	Insurance Co: Policy number: Date of policy: Cover:
Workmens Compensation Assurance (WCA) Are you insured ? YES/NO	Policy No: Latest WCA assessment: Latest WCA assessment date:
Building Industry Bargaining Council (BIBC) Are you registered ? YES/NO	BIBC name: Employer No: Date of registration: Latest BIBC stamp (contribution) analysis and invoice date: Quantity of employees receiving stamps per the latest BIBC stamp analysis & inv:
Receiver of Revenue : Income tax Are you registered ? YES/NO	Receiver of Revenue office: Reference No: Date of registration:
VAT Are you registered ? YES/NO	Receiver of Revenue office: Reference No: Date of registration:
P.A.Y.E. Are you registered? YES/NO	Receiver of Revenue office: Reference No: Date of registration:
Unemployment Insurance Fund Are you registered ? YES/NO	Ref No: Date of registration:
Master Builders Association Are you a member? YES/NO	Name of MBA: MASTER BUILDERS ASS, CAPE TOWN Member Since:
Can you give details of at least 10 clients for work done of a similar size or nature during the past year ?	YES/NO
Can you give the details of five suppliers of goods with whom at present you have credit limits ?	YES/NO



Indicate the type of membership sought

Our company will be represented by: Title:  Name:   
Alternate Nominee: Title:  Name:

**REFERENCES:**

Please provide names, addresses and telephone numbers of three clients where work has been done **or contractors where materials were supplied** within the last 12 months.

Name:  Telephone N<sup>o</sup>:

Street Address:

Name:  Telephone N<sup>o</sup>:

Street Address:

Name:  Telephone N<sup>o</sup>:

Street Address:

Name:  Telephone N<sup>o</sup>:

Street Address:



**CRITERIA FOR MEMBERSHIP**

**1. CONTRACTORS:**

- a) The proposer must be an existing WARAC contracting member with a minimum of 3 years membership.
- b) The seconder must be an existing WARAC manufacturing member with a minimum of 3 years membership.
- c) The applicant/company been involved in waterproofing or roofing personally for a minimum of 3 years.
- d) The companies' representative to have attended at least 2 consecutive General Meetings.
- e) The companies' representative to have attended a meeting with the Management Committee, **if required.**
- f) Referees submitted to reflect the applicant as being responsible, reliable and **providing** good quality workmanship **at all times.**

**2. MANUFACTURERS/SUPPLIERS**

- a) The proposer to be an existing WARAC contracting member who has laid the manufacturer's systems for a minimum of 3 years.
- b) The seconder to be an existing WARAC contracting or manufacturing member with a minimum of 3 years membership.
- c) The manufacturer/supplier to have been involved in the production/supply of a waterproofing/roofing system for a minimum of 3 years.
- d) The companies' representative to have attended at least 2 consecutive General Meetings.
- e) The companies representative to have attended a interview with the Management Committee, **if required**

**METHOD OF ACCEPTANCE**

- 1. Once the above criteria have been successfully met, the Management Committee will circulate to all voting members, a notice stating that the applicant has applied for membership. The voting members have 21 days wherein to lodge any objections. If any objection is received, no decision shall be taken by the committee on acceptance of the new member until the objection has been overcome to the satisfaction of all parties involved.
- 2. If after 21 days no objections are received or if any objections received have been successfully resolved to the satisfaction of all parties, the committee shall again meet and decide on acceptance of the applicant as a member.
- 3. If at this meeting the applicant does not receive the necessary acceptance by the committee he may, if so desired, serve a probationary period of one year after which time the committee shall again take a decision on his acceptance as a member. During this period no voting rights will be given but conversely no payment of fees will be required. Upon acceptance, the applicant will be so notified in writing and presented with his membership certificate.

**Signed:** \_\_\_\_\_ **Date:**

**Name of Signatory:**



**We have known the applicant within the waterproofing and roofing industry for ..... years.**

**We have known the applicant within the waterproofing and roofing industry for ..... years.**

**Proposer:**

**Seconder:**

**Approved by Chairman:** Yes  No

**Approved by Secretary** Yes  No

**Signature:** \_\_\_\_\_

**Signature:** \_\_\_\_\_