



IOP(SA) MEMBERSHIP APPLICATION FORM

DATE :

MEMBERSHIP CATEGORY

- | | | |
|----------------|-----------------------|-------------|
| * MANUFACTURER | * PLUMBING CONTRACTOR | * PLUMBER |
| * MERCHANT | * ASSOCIATE | * ASSISTANT |

COMPANY DETAILS

COMPANY NAME _____

POSTAL ADDRESS _____

TOWN AND SUBURB _____ POSTAL CODE _____

TEL _____ FAX _____

CELL _____

EMAIL _____

WEBSITE _____

CONTACT PERSONS _____

SCHEDULE OF QUALIFIED PLUMBERS

NAME _____

NAME _____

NAME _____

NAME _____

NOTES

1. Copy DOL PLUMBING TRADE TEST certificate or copy CETA NATIONAL CERTIFICATE NQF LEVEL 3 PLUMBING required before the company can be registered.
2. Should the company exceed 4 QUALIFIED PLUMBERS, kindly attach a separate schedule to this application.
3. Copy of the company's registration papers and the company's VAT/tax clearance certificate required.

TYPE OF PLUMBING WORK

NEW CONTRACT PLUMBING WORK YES / NO
 PERCENTAGE OF TOTAL BUSINESS %

MAINTENANCE PLUMBING WORK YES / NO
 PERCENTAGE OF TOTAL BUSINESS %

NOTES

1. IOP(SA) HAS BEEN REQUESTED BY THE INSURANCE INDUSTRY TO LIST MAINTENANCE PLUMBERS ON A SEPARATE DATABASE.
2. IOP(SA) HAS BEEN REQUESTED BY ARCHITECTS / ENGINEERS TO LIST PLUMBING CONTRACTORS ON A SEPARATE DATABASE FOR THOSE CONTRACTORS WORKING IN THE BUILDING INDUSTRY ON NEW CONTRACT WORK, FOR TENDER SELECTION PURPOSES.

PAYMENT OF IOP(SA) FEES BY MONTHLY DEBIT ORDER AGREEMENT

TAKE THE HASSLE OUT OF PAYING MEMBERSHIP FEES

NAME OF COMPANY _____

PHYSICAL ADDRESS _____

TOWN OR SUBURB _____ CODE _____

TEL _____ FAX _____

BANK NAME _____

BRANCH _____

CODE _____

ACCOUNT NAME _____

ACCOUNT NUMBER _____

I HEREBY AUTHORISE THE INSTITUTE OF PLUMBING SA TO DRAW ON MY ACCOUNT LISTED ABOVE, IN EQUAL MONTHLY AMOUNTS FOR THE PAYMENT OF OUR/MY ANNUAL IOP(SA) MEMBERSHIP FEES

MONTHLY PAYMENT R _____

SIGNATURE OF ACCOUNT HOLDER _____ DATE _____

CONDITIONS OF MEMBERSHIP FEE PAYMENT AGREEMENT

- A. Kindly note that apart from the debit order payment method listed above, members can if preferred pay their annual membership fees up front, providing that the fees are paid within 30 days of date of invoice.
- B. Members who are in default with IOP(SA) for non payment of annual membership fees will be suspended, should the annual membership fees not be received within 30 days of date of invoice.
- C. Members who resign their membership will be required to pay the full amount of the fees outstanding until the end of the current financial year in which they resign.

SIGNATURE OF MEMBER _____ DATE _____

