Scottish Building Federation Membership Application Form

FULL COMPANY NAME

BUSINESS CONTACT DETAILS

PHONE:	EMAIL:	VAT REG No:
COMPANY REGISTRATION No:	ESTABLISHED:	WEBSITE:
ADDRESS:		
	POST CODE:	

STATE FULL NAMES OF ALL PROPRIETORS, PARTNERS, DIRECTORS, THEIR POSITIONS AND NUMBER OF YEARS WITH THE COMPANY

NAME	POSITION	YEARS WITH COMPANY	EMAIL

BANKRUPTCY/ADMINISTRATION/LIQUIDATION

Have any of the people named as Partners or Directors, or has any company of which they have been a Director: been declared bankrupt, had a winding up petition presented to the Court or passed a resolution for voluntary winding up within the last 5 years?   YES ☐   NO ☐

IF **YES** PLEASE GIVE DETAILS: _____

CONTACT DETAILS OF KEY EMPLOYEES

	NAME	TEL NO	EMAIL
ADMIN:			
EMPLOYMENT AFFAIRS:			
HEALTH & SAFETY:			
FINANCE:			
TRAINING:			

WORK CARRIED OUT (TICK APPROPRIATE **)**

DOMESTIC WORKS/MAINTENANCE/REPAIRS		FIT OUT		HERITAGE & CONSERVATION	
SMALL WORKS		SHOPFITTING		DESIGN & BUILD	
REFURBISHMENT		JOINERY MANUFACTURE		MAJOR PROJECTS	
PFI/PPP		SPECIALIST TRADE		ROOFING	
OTHER (PLEASE SPECIFY)					

NUMBER OF EMPLOYEES

STAFF	
OPERATIVES	
APPRENTICES	

EMPLOYEE SKILLS & QUALIFICATIONS

	YES	NO
Do all Employees have a formal Contract of Employment	YES	NO
Are all your employees registered with CSCS or equivalent	YES	NO
If NO please indicate approximate %age that are registered	YES	NO
Please state current Skills Qualification Provider		

OTHER MEMBERSHIPS

ARE YOU A MEMBER OF ANY OTHER TRADE FEDERATION?	YES ☐ NO ☐	IF **YES** PLEASE STATE: _____
ARE YOU A MEMBER OF THE BUILDING & CIVIL ENGINEERING SCHEME (B&CE)	YES ☐ NO ☐	IF **YES** PLEASE STATE REG NO: _____
ARE YOU REGISTERED WITH CONSTRUCTIONSKILLS (FORMERLY CITB)	YES ☐ NO ☐	IF **YES** PLEASE STATE REG NO: _____

HEALTH & SAFETY

DO YOU HAVE A HEALTH & SAFETY POLICY	YES ☐ NO ☐	IF **YES** ENCLOSE COPIES OF YOUR POLICY STATEMENT (PLEASE TICK IF ENCLOSED) ☐
DO YOU EMPLOY A SAFETY OFFICER	YES ☐ NO ☐	
HAS YOUR ORGANISATION HAD AN HSE ENFORCEMENT NOTICE ISSUED IN THE LAST 5 YEARS	YES ☐ NO ☐	IF **YES** PLEASE PROVIDE DETAILS OF NOTICE AND REMEDIAL ACTION TAKEN. (PLEASE TICK IF ENCLOSED) ☐

IS YOUR COMPANY A MEMBER OF A SAFETY GROUP (EG SAFE, EBSOL, ETC)   IF **YES** PLEASE STATE _____

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QUALITY ASSURANCE

DO YOU HAVE THIRD PARTY ACCREDITATION (E.G. ISO 9001/2) | YES | NO   IF**YES** PLEASE STATE _____

LIABILITY INSURANCE

PLEASE STATE THE NAME OF YOUR INSURER _____

PLEASE STATE THE INSURANCE COVER HELD _____

ENCLOSE COPIES OF YOUR CERTIFICATE(S) OF INSURANCE HELD
(PLEASE TICK IF ENCLOSED) [   ]

FINANCIAL INFORMATION

PLEASE PROVIDE DETAILS OF YOUR COMPANY TURNOVER OVER AS FOLLOWS:

ANTICIPATED THIS YEAR	
LAST YEAR	
2 YEARS AGO	

FINANCIAL PROBITY – BUSINESSES WILL / MAY BE REQUIRED TO PROVIDE EVIDENCE OF FINANCIAL INTEGRITY BOTH ON APPLICATION AND ON AN ONGOING BASIS.

COPIES OF FILED ACCOUNTS FOR THE PAST TWO YEARS OR STATEMENT FROM YOUR BANK / ACCOUNTANT, PROVIDED. | YES | NO |

REFERENCES

CLIENTS
PLEASE GIVE NAMES, ADDRESSES AND CONTACT DETAILS OF TWO CLIENTS OR PROFESSIONAL REFERENCES I.E. ARCHITECTS, SURVEYORS WHO MAY BE APPROACHED FOR A REFERENCE.

REFERENCE 1 _____

REFERENCE 2 _____

NOTE: WE WILL NOT CONTACT WITHOUT YOUR PRIOR CONSENT.

DECLERATIONS

We the undersigned, hereby make application for membership of **SBF**.

We certify that the information contained in this application is correct.

We agree to abide by the Rules of Membership, Code of Conduct and Conditions of **SBF**.

We acknowledge that as a member of the **SBF** we are encouraged to adhere to the terms and conditions of the Working Rule Agreement.

In the event of dispute we agree to adhere to the decisions and recommendations resulting from the SBF Dispute Resolution Process.

We agree to pay subscriptions to **SBF** on the due dates for all years of membership.

We agree to give three months written notice to **SBF** of intention to resign from corporate membership and agree to pay pro-rata subscription for the last period of membership.

SIGNED _____   DATE _____

POSITION _____

Scottish Building Federation, Crichtion House, 4 Crichtons Close, Holyrood Edinburgh, EH8 8DTT: 0131 556 8866 E:Kimberley@scottish-building.co.uk