

WE CANNOT PROCEED WITH YOUR APPLICATION IF THE FORM IS NOT COMPLETED AND THE APPROPRIATE DOCUMENTS ENCLOSED.

Company name

Company address

Post Code

Tel No. Fax No.

E-mail Contact name

Position

Member of other Associations

Registration number VAT number

Date formed Date incorporated (Ltd. companies)

Do you have a current CIS5 or CIS6 certificate? YES NO Tax certificate No. Expiry date

If your firm does not qualify for the above provide a copy of your CIS4 Reg. card

Directors/Partners/Owners Please give details of persons with a financial interest

Name 1 Name 2

Position Position

Qualifications (including apprenticeship) Date obtained Qualifications (including apprenticeship) Date obtained

Date obtained Date obtained

Date obtained Date obtained

No. of operatives employed No. of apprentices employed

Contract Limits Minimum value £ Maximum value £

Insurance Details

Insurance Type	Insurer	Policy No.	Cover £	Expiry date
Employers liability
Public liability
Other

Is your company Quality Assured? YES NO **Categories of work your company undertakes:**

If yes, give details: Part

New work <input type="checkbox"/>	Housing Association <input type="checkbox"/>	New Work <input type="checkbox"/>
Ames Taping <input type="checkbox"/>	Historic buildings <input type="checkbox"/>	Commercial <input type="checkbox"/>
Industrial <input type="checkbox"/>	Sub-Contracting <input type="checkbox"/>	Hospitals <input type="checkbox"/>
Local Authorities <input type="checkbox"/>	Special Finishes <input type="checkbox"/>	Domestic <input type="checkbox"/>

Approving Body

Reference No.



Scottish
Decorators'
Federation

Areas of work:

- | | | | | | |
|---------------------|--------------------------|---------------------|--------------------------|-------------------|--------------------------|
| Central Belt | <input type="checkbox"/> | West Scotland | <input type="checkbox"/> | East Scotland | <input type="checkbox"/> |
| North West Scotland | <input type="checkbox"/> | North East Scotland | <input type="checkbox"/> | Highlands/Islands | <input type="checkbox"/> |
| Borders | <input type="checkbox"/> | South West Scotland | <input type="checkbox"/> | Outside Scotland | <input type="checkbox"/> |

Proposer
Name

Second
Name

Company

Company

Address

Address

Post Code

Tel No

Post Code

Tel No

Signature

Signature

References

Name 1

Address

Tel No.

Name 2

Address

Tel No.

Name 3

Address

Tel No.

I hereby apply to join the Scottish Decorators' Federation and confirm that our company will abide by the Constitution and Rules of the Federation.

Signature

Date

Position