



Application for Associate Membership

Please complete all sections and sign the declaration on page 3

PART 1 DETAILS OF THE COMPANY

Name of Applicant/Company:			
Head Office Address:			
Telephone:		Fax:	
Email:		Website:	
Status: (eg Sole Trader, Partnership, Limited Company etc)			
Date of Incorporation:(if applicable)			
Company Registration No:		VAT No:	
Ultimate Holding Co: (if applicable)			
Name & initials of Directors or Proprietors of Applicant/Company followed by letters indicating any qualifications held:			
Who will represent the applicant at LRWA meetings?			
Who will be nominated as Technical contact?			
If their addresses/phone numbers/email are different from HO please supply:			
Please provide name of LRWA Manufacturing Member who is sponsoring your application;			
Sponsors Signature / Company Name / Date:			

Accepted/rejected:

Date:

PART 2 DETAILS OF THE BUSINESS CARRIED ON BY APPLICANT/COMPANY

All questions must be answered

1.	Do you manufacture products used within the Liquid Waterproofing and Roofing marketplace?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2.	For how long have you been manufacturing these products?		
3.	At what address do you manufacture these products?		
	Postcode: _____ Telephone No: _____		
4.	Do your products carry a minimum performance guarantee of 10 years?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
4.	Do your products conform to relevant British or European Standards? If YES please provide details:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
5.	Does your company carry Employers and Public Liability Insurance?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
6.	Does the company hold any Quality Assurance Certification? If YES please provide details:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
7.	a) Does the company require installation by competent, trained operatives?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	b) Is your company willing to help with the development of your products for the use in the LRWA?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
8.	Does the company support the activities and Codes of Practice of the LRWA?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

**PART 3 DETAILS OF PRODUCTS MANUFACTURED, PRODUCED OR SOLD
UNDER YOUR OWN LABEL**

Both sections MUST be completed – you are not being asked to declare anything other than published data.

Section A

Please list your products (Brand Names)

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Section B

Please give a brief description of each

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Please attach literature for all products listed.

PART 4 DECLARATION – TO BE SIGNED IN ALL CASES

We, the undersigned, being an organisation engaged in the business of manufacture and/or sale/or installation of liquid waterproofings (or in the business of supplying products or services thereto), hereby apply for Membership of the Liquid Roofing and Waterproofing Association.

In the event of our application being accepted, we undertake to abide by the Code of Conduct governing the Association, which we have read.

Signed:		Title:	
On behalf of:		Date:	