

MEMBERSHIP APPLICATION

I/We, the undersigned, do hereby apply to become recognised as a (tick relevant)

Member Type	Tick
IWH Trade Member (<i>Operations, Supplier, Manufacturing Companies</i>)	
IWH Trade Consultant (<i>Sole Proprietor</i>)	
IWH Trade Individual (<i>Own Capacity</i>)	
IWH Professional Body (<i>Professional Development Partners (PDP)</i>) <i>Only select this one if you provide any working at heights training – complete sections 1.1/2/3/4</i>	

Notice: If you are a Professional Development Partner, you will have to become a recognised PDP with the IWH Professional Body. It is not permitted to be a Trade Member and not be recognized with the IWH Professional Body when your organisation does any work at height related training.

After the application verification process has been completed, an invoice will be sent for the initial compliance audit. Once proof of payment is received, the compliance audit will be conducted. After successful completion of the audit and proof of payment received for the IWH membership fee, a membership certificate will be issued. The certificate is valid for one year or from date of joining until the end of February of the following year.

1. DETAILS OF APPLICANT

1.1. Company / Consultant / PDP

Trading Name / CC / PTY (Ltd)	
Street Address:	
Postal address:	
E-mail address:	
Web-site address:	
Telephone No:	
Additional Contact No:	

1.2. Individual

Full Name of Applicant	
Identification Number:	
Street Address:	
Postal address:	
E-mail address:	
Cell phone No:	
Telephone No:	
Additional Contact No:	

2. REGISTRATION

Notice: Proof of documents needs to be submitted with the completed application forms

Description	Number / Comment	Proof Attached
Company Registration # with CIPC		
VAT # (if applicable)		
Income Tax #		
Letter of Good Standing	Registration #:	

Description	Number / Comment	Proof Attached
	Expiry Date:	
Skills Development Levy Reg. #		
Public Liability	Value:	
Annual Turn-Over	Value:	

Company	Type	Tick
Member Allocation	Enterprise (2 or more branches or companies)	
	Normal (1 branch or turnover more than R10,000,000.00)	
	Micro (Turnover less than R10,000,000.00)	

3. CONTACT DETAILS

Name & Surname:	Title:	Cell:	E-mail address:
	CEO/Manager		
	Invoices/Accounts		
	Representative		
	Representative		

4. SCOPE OF BUSINESS

Please mark your main company activity with a "1"
For more than one activity, mark the secondaries with an "✓".

Chamber	1 / ✓	
	Trade	PDP
Rope Access		
Fall Protection		
Suspended Access Equipment		
Access Towers (Aluminium Scaffold)		
Ladders		
Scaffolding (Steel)		
Mobile Elevating Work Platforms (MEWP's)		
Falsework		
Wind Turbines		

5. FINANCIAL REFERENCES

These are references of companies you have accounts with

Company	Contact Name & Surname	Cell:	E-mail address:

6. EMPLOYEES

Are all your employees who actively work at height, trained, and registered as practitioners against a Designation with the IWH Professional Body?

YES / NO / NA

Staff Allocations per Province

Requirement	EC	FS	GP	KZN	LIM	MP	NC	NW	WC	TOTALS
Number of staff working at height										
General Staff										
Managers and administration staff										
Directors	No split by province required									
TOTAL COMPLEMENT										

7. PDP EMPLOYEE DETIALS

Facilitators / Assessors / Moderators*								
Full Name & Surname	ID	F/A/M*	Full time/ Contract	SLA Y/N/NA	Relevant US ID	A/M Reg. No.	Registered SETA Name	IWH Registered Practitioner

Trade Members recognised as PDPs with the IWH Professional Body

The registration of Facilitators, Assessors and Moderators against a Designation with the IWH Professional Body will be dealt with separately during the PDP recognition process.

8. BRANCHES / OTHER TRAINING SITES OF DELIVERY

Do you have any branches and/or subsidiary companies?

YES / NO

Branches			
Branch name	Physical address	Telephone	Contact

Do you have any other sites used for training delivery?

YES / NO / NA

Training Sites			
Site name	Physical address	Telephone	Contact

9. OCCUPATIONAL HEALTH & SAFETY ACT 85 OF 1993

Do you comply with all relevant sections of the current Act and Regulations which apply to your business?

YES / NO / NA

10. COMPANY AUDITOR

Name:			
Telephone No:		E-mail:	

11. IWH AUDITS

The recognition process will include a site audit which will be carried out by an IWH approved and qualified auditor. The audit criteria will be provided to the applicant before the visit so that the applicant can prepare themselves properly. The initial once off audit fee and annual membership fee, must be paid upfront before the site audit will be arranged. The applicant reserves the right to request another auditor if the auditor chosen by the IWH might pose potential conflict of interest (where this can be evidently proven).

Costs incurred for any required subsequent follow-up site visit/s will be for the account of the applicant.

12. RELEVANT ANNEXURES

Once this application form is filled in, please also complete the following annexures as per stipulated below for the type of application being submitted.

Trade Members:	Annexure A
Professional Development Partners:	Annexure A & Annexure B

13. DECLARATION BY APPLICANT

I declare that I am authorised to complete this application on behalf of the applicant, and if accepted, will be responsible for the payment of all fees. I furthermore declare that, if admitted as a Trade member and/or PDP, to uphold and abide by the Constitution, the Code of Ethical Practice, all Legislation and Standards applicable to the industry, any Rules and decisions of the Institute as may be determined from time to time, and the payment of fees when due.

NAME & SURNAME	POSITION:	SIGNATURE:	DATE:

SEE LAST PAGE FOR FEE ALLOCATION

14. FEE ALLOCATION

ANNUAL SUBSCRIPTION (1st of March until 28th of February)

LARGE ENTERPRISES: R 14,431.00 per annum ex VAT

(With 2 or more branches / 2 or more registered companies)

NORMAL ENTERPRISES: R 7,397.00 per annum ex VAT

(With 1 branch / Turnover > R 10 Mil)

MICRO ENTERPRISES: R 5,829.00 per annum ex VAT

(Turnover < R 10 Mil)

AFFILIATE: R 1,620.00 per annum ex VAT

(Consultants)

INDIVIDUAL: R 510.00 per annum ex VAT

(Registered IWH Practitioner / SACPCMP Registered)

INITIAL AUDIT FEE

R 3,735.00 once off ex VAT

(Large, Normal and Micro companies)

ADMINISTRATION AND REGISTRATION FEE

R 500.00 once off ex VAT

(Affiliate companies)

R 200.00 once off ex VAT

(Individuals)

Additional Costs if not arranged by applicant:

Flights

Accommodation

Travel (more than a 50km radius from the IWH)

AUDIT and MEMBERSHIP FEE: Payable before scheduling of Audit – non-refundable