

Application for Admission for to Stainless Steel Specialists Register

PART 1



The Application Form for ASSDA Accreditation has been designed to not only as a method for ASSDA to gather the required information, but for the Applicant to identify strengths and weaknesses in their own organisation and provide a clear indication where improvement can be achieved. This Application examines:

- › Workshop capabilities
- › Avoiding contamination practices
- › Quality control
- › Safety management
- › Training systems
- › Comprehensive stainless steel specific knowledge statement

By completing this Application, organisations can identify areas for improvement in which ASSDA can provide assistance.

The information provided in this application will be used by ASSDA as the basis for admission to the Stainless Steel Specialists Register. The information must be accurate at the time of application, and a director of the company making the application must submit the application. *The responsible director must initial each page.*

You are required to submit this application as a signed paper copy. The application fee is due with the submission of this application. The fee structure is outlined on following page.

The application should be mailed to:
ASSDA: Stainless Steel Specialists Register
Level 9, 307 Queen Street
BRISBANE QLD 4000

ASSDA Accreditation Fee Structure

APPLICATION FEE (includes GST)
\$99.00

- › Application fee is due with the submission of Application Part 1
- › Application Part 2 is sent from ASSDA with due date 30 days hence.

ACCREDITATION FEE (includes GST)

New: ASSDA members \$1200.00, non-members \$1700.00
Annual renewal: ASSDA members \$1200.00, non-members \$1700.00

The Accreditation fee pays for a one-year period. An annual renewal fee of \$1200 is due on the anniversary of Accreditation.

Please refer to page 9 of the *ASSDA Accreditation Manual* for a flow chart on the process of becoming ASSDA Accredited.

PART A – BUSINESS WISHING TO JOIN REGISTER

A1 Business Type:

Incorporated Entity

Partnership

Sole Trader

Trust

Other (specify): _____

A2 Registered Name of Business:

A3 Date of First Registration:

A4 Australian Business Number (ABN):

A5 Trading Name: *(If different to Registered Name)*

A6a Head Office Postal Address:
(If same as postal, leave blank)

Head Office Street Address:

A6b Contact Details:

Phone: () _____ Fax: () _____

Email: _____ Website: _____

A7c States/Territories in which the Company trades:

New South Wales

Victoria

Queensland

Western Australia

South Australia

Northern Territory

Australian Capital Territory

Tasmania

Other overseas (specify): _____

A8 List address/es of branch premises:

(Please attach additional sheet if more than one branch)

Contact: _____

Postal Address: _____ Street Address _____

Phone: () _____ Fax: () _____

Email: _____

A9 Company Directors

Please provide details of all the directors of the business wishing to join the Stainless Steel Specialists Register, as supplied to ASIC and credit reference bureaux. Please note this information is for the use of the ASSDA Secretariat and ASSDA Board only, and will not be divulged to any other party.

1. Name: _____
Date appointed: _____
Date of Birth: _____
Address: _____
Resident overseas? _____

2. Name: _____
Date appointed: _____
Date of Birth: _____
Address: _____
Resident overseas? _____

3. Name: _____
Date appointed: _____
Date of Birth: _____
Address: _____
Resident overseas? _____

4. Name: _____
Date appointed: _____
Date of Birth: _____
Address: _____
Resident overseas? _____

5. Name: _____
Date appointed: _____
Date of Birth: _____
Address: _____
Resident overseas? _____

6. Name: _____
Date appointed: _____
Date of Birth: _____
Address: _____
Resident overseas? _____

* **A10 Insurance Details:**

Please forward Certificate of Currency to ASSDA for all policies held.

Work Cover Provider: _____
Policy No: _____
Current to (date): _____

Public Liability Provider: _____
Policy No: _____
Current to (date): _____
Amount of cover: \$ _____

Any other applicable insurance (including product liability insurance) Provider: _____
Type: _____
Policy No: _____
Current to (date): _____

Provider: _____
Type: _____
Policy No: _____
Current to (date): _____

Provider: _____
Type: _____
Policy No: _____
Current to (date): _____

Provider: _____
Type: _____
Policy No: _____
Current to (date): _____

PART B – SCOPE OF REGISTRATION

*** B1 Business Function:**

- Fabrication services *Specialty.....
- Installation services

*** B2 Industry Category:**

- Architectural
- Food, Dairy and Beverage
- Heavy Industrial (3mm and more typical section thickness)
- Light Commercial (3mm and less typical section thickness)

** Specialty refers to whether your organisation specialises in a particular area of fabrication such as machining.*

PART C – BUSINESS CAPABILITY

C7 Employee/Contractor Function Analysis:

(List number of employees, contractors/sub-contractors engaged in specific activities/roles. Contractors are limited to the number of people under your direct control. Where a person does more than one function, include them in more than one category – we are looking for the total effort available.)

Function	People for whom this is their primary function	Total Number of People Performing the Role	
		Employees	Contractors
Administration			
Sales Estimating			
Engineering Design			
Drafting			
Project Supervision			
Manufacture Management, Purchasing, Planning and Supervision			
Tradesmen/Trades Assistants			
Installation			
Apprentices			
Non Trade Qualified (Welding, polishing, assembly, machine operation etc)			
TOTAL (This equals the total number of people in your organisation)			

CODE OF ETHICS and PRACTICE FOR REGISTRANTS

Accredited businesses of the Stainless Steels Specialists Register must:

- › Aspire to the highest level of business ethics, as generally expected by the business community.
- › Aspire to the highest level of industry competence through continued education, and by sharing ideas and experiences with other SSSR accredited businesses.
- › Be honest and thorough in all business dealings, including dealings with clients, client's customers, specifiers and others in the stainless steel industry.
- › Undertake professional practice in a responsible, careful and diligent manner at all times and only in their relevant areas of expertise.
- › Not disclose any confidential information acquired in the course of professional practice unless required to do so by law.
- › Respect the privileges, rights and reputation of other accredited businesses of the Stainless Steel Specialists Register.
- › Not engage in any activity constituting, or leading to, a conflict of interest.
- › Treat all persons fairly and equally, regardless of race, religion, gender, disability, age or ethnicity.
- › Only make public statements, express opinions or give evidence based on adequate knowledge. Accredited businesses shall adhere to truth in advertising standards.
- › Strive to promote the ASSDA SSSR and its goals, as well as the stainless steel industry as a whole, through educational venues, public relations opportunities, and advertising media.
- › Communicate non-confidential information relating to other accredited businesses violation of this code of ethics to the ASSDA Secretariat.
- › Maintain appropriate levels of insurance cover throughout the full period of registration applicable in the particular State or Territory of practice.
- › Enable a client or subcontractor to reach an informed opinion regarding its overall capacity in order to assess risk.
- › Be able to demonstrate its ability to manage and deliver projects within the specified time.
- › Establish and maintain effective systems to manage the risks to the health and safety of all personnel, arising from the nature of the work performed.
- › Abide by and endeavour to secure the widest possible acceptance of this code of ethics and practice.

PART D – DIRECTOR’S DECLARATION

Please re-read your application carefully before signing this declaration. Return the entire application with the signed declaration.

I certify that the information provided in this application is true and correct to the best of my knowledge.

I have read and accept the CODE OF ETHICS and PRACTICE FOR REGISTRANTS and will endeavour to ensure that it will be followed at all times.

Signature: _____

Date: _____

Print Name: _____

Position Held: _____