

ACCREDITED INSTALLER

MEMBERSHIP APPLICATION DOCUMENT



ACCREDITED INSTALLER MEMBERSHIP APPLICATION

To reduce risk to both specifier and client Axter operates two accredited installer schemes: Axtershield and Axter Alliance.

Scheme membership is based upon the roofing contractor's ability to demonstrate professionalism, competency and commitment to health and safety and environmental management standards.

Membership of Axtershield or the Alliance scheme is not dependent upon minimum annual purchases of Axter waterproofing systems. Instead, we welcome roofing contractors as members of our approved contractor network that are committed to demonstrating professionalism and achieving defect-free, high-quality system installation on all Axter projects.

Please note that Axtershield membership is restricted and subject to additional financial criteria. Please contact us if you have any questions.

To successfully submit your application and be able to start your journey to membership, please ensure the following supporting documents are provided:

- » Audited Accounts (last two trading years)
- » Health and Safety policy
- » Quality Policy Statement
- » Environmental Policy
- » Training and Management Procedures Policy
- » Public Liability Insurance Policy
- » Professional Indemnity Insurance Policy
- » Application administration fee – £72.00 (inc VAT) – Non-Refundable (Payment can be made by cheque or BACS. Payment details are provided at the back of this document)

Please complete all relevant sections of this document and return by email to: info@axterltd.co.uk or by post to Axter Ltd, West Road, Ransomes Europark, Ipswich IP3 9SX.

If you would like to discuss any aspect of Axter's accredited installer schemes prior to application or require assistance in completing this document, please contact us at info@axterltd.co.uk.

Once your application has been received and approved to progress you will be contacted by Axter Limited.

1. ACCREDITATION SCHEME (Please tick as appropriate)

I am applying to become an **Axtershield** accreditation scheme member.

I am applying to become an **Alliance** accreditation scheme member.

2. ROOFING CONTRACTOR

Trading name

Registered name (if different)

Address

Postcode

Telephone number

Fax number

Email address

Website address

Company registration number

VAT registration number

3. POSITIONS

Managing Director - Name

Telephone

Mobile number

Email address

Address

Financial Director - Name

Telephone

Mobile number

Email address

Address

Contracts Director / Manager - Name

Telephone

Mobile number

Email address

Address

Ordering contact - Name

Telephone

Mobile number

Email address

Address

Key contact for Axter - Name

Telephone

Mobile number

Email address

Address

4. COMPANY DETAILS

Year founded

Company turnover for the last three financial years (please provide copies of the last two financial years' audited accounts)

Year ending 20 £

Year ending 20 £

Year ending 20 £

Parent Company name and address (if applicable)

Subsidiary Companies (if applicable)

What industry related trade or similar organisations are you a member of? (e.g. NFRC, Constructionline, etc.)

5. PAYMENT

Axter's payment terms are 30 days end of month. Axter insures its credit risks. In the event that the credit limit provided on your company is insufficient for the level of orders for normal business between yourselves and Axter, are you able to provide any other form of security such as Directors' personal or Parent Company guarantees?

Yes No

6. PURCHASING

Please provide details of the specialist roofing merchant(s) from whom you regularly buy your roofing materials:

7. HEALTH & SAFETY

Do you have a formalised Health and Safety policy? (Please provide evidence and confirm if this is to any recognised standard)

Yes No

8. INSURANCES

(Failure to provide current documentation will result in termination of your application)

Do you have Public Liability Insurance? (Please provide evidence in the form of current copies of your insurer and policy documentation)

Yes No

9. ENFORCEMENT NOTICES

Has the HSE or any other enforcement body issued action against your organisation or an employee during the past five years?

Yes No

If YES please provide details:

Qualification 2

No. of staff

Qualification 3

No. of staff

Qualification 4

No. of staff

Please provide evidence to support the above.

10. QUALITY

Do you have a documented Quality Policy Statement?

Yes No

Do you have a fully documented Quality System and have you been accredited to ISO 9001 standard by a UKAS accredited body?

Yes No

11. ENVIRONMENTAL

Do you have a fully documented Environmental Policy Statement?

Yes No

Do you have a fully documented Environmental Management System and have you been accredited to ISO 14001 standard by a UKAS accredited body?

Yes No

12. TRAINING

Do you have management procedures in place to ensure that your workforce is competent to undertake the installation of Axter materials?

Yes No

13. QUALIFICATIONS

(Please indicate the number of site operatives and supervisory staff with relevant qualifications, including CSCS card type.)

Qualification 1

No. of staff

14. SUBCONTRACT / SUBLETTING / CROSS HIRING

Number of direct employees
(please provide copy of management structure)

Estimate of the percentage of sub contract to directly employed site labour in the previous six months (please provide details as to how the workmanship quality of the sub contract labour is checked if the percentage is greater than 10%)

15. CONTRACT PREFERENCES

(Please give details of the geographical area in which you would like Axter to recommend your company for roofing work.)

PREFERRED CLIENT TYPES

New build Refurbishment Both

SECTOR

Public Private Both

PREFERRED CONTRACT VALUE

Max. £ Min. £

16. REFERENCES

Please provide details of four major customers / contracts traded with / worked on in the last twelve months. The references should reflect a cross section of the range of work and geographical coverage for which you wish to be considered by Axter.

Company name 1

Contact name

Position

Tel/Email

Project name

Contract value

Company name 2

Contact name

Position

Tel/Email

Project name

Contract value

Company name 3

Contact name

Position

Tel/Email

Project name

Contract value

Company name 4

Contact name

Position

Tel/Email

Project name

Contract value

18. WORKMANSHIP AUDITS (SITE VISITS)

Please provide details of three projects that can be audited for workmanship quality by Axter Limited.

ESTABLISHED PROJECT

(Completion over 3 years ago)

Site name

Address

Completion date

RECENT PROJECT

(Approximately 1 year since completion)

Site name

Address

Completion date

CURRENT PROJECT

(On-going)

Site name

Address

Completion date

19. OTHER DETAILS

Is there anything else you wish to add to support your application to become an Axtershield Installer?

20. DECLARATION

I declare that the information provided in this Accreditation Document is correct at the time of completion. I have provided all the information requested and understand that a false statement could result in Axter refusing inclusion in the Axtershield Installer network. I understand that should the information change then Axter will be informed and failure to do so may invalidate approval status.

Completed by (authorised representative):

Position:

Signature (Sign below):

Date:

PLEASE NOTE

Workmanship audits are required to support your membership application, and in some instances, it may be necessary to complete a contractor audit in order to verify the information submitted during application. Axter reserves the right to refuse any application based on the documentation submitted or any further information received post-application.

PAYMENT DETAILS

BACS payment details:
Account Name: Axter Limited
Account No: 03876101
Sort code: 53-61-24.

Please use Axter ACS along with your company name as your transfer reference.

Cheques should be made payable to:

Axter Limited,
West Road,
Ransomes Europark,
Ipswich
Suffolk IP3 9SX

Please mark for the attention of the Finance Department.
Please write on the back of the cheque Accredited Contractor Scheme along with your company name.

DATA PRIVACY

Please note that personal information given on this form will be stored and processed by Axter, in connection with your Axtershield Installer (Ai) application, membership of the Ai network, our skills workshops and for future communication with you on this and related matters and/or as part of our business relationship. This information may also be shared with relevant roofing trade associations regarding training funding, certification, CSCS smart cards, etc. Axter is committed to the protection of personal data. Our [Privacy Policy](#) explains how we will store and use your data; If you have any queries, please email us on info@axterltd.co.uk.



CREDIT ACCOUNT
APPLICATION

1. DETAILS TO BE COMPLETED BY APPLICANT

Trading name

Address

Postcode

Telephone number

Fax number

Email address

Registered name (if different)

Address

Postcode

Enter VAT No. (If registered)

Address to which invoices are to be sent

Postcode

Contact name

Job title

Tel no.

Extn.

Email

Purchasing / order department details

Name

Email

Tel no.

Fax no.

Main activity

Type of organisation, e.g. sole proprietorship, partnership, private limited company, PLC, co-operative

Type of premises e.g. shop, office, factory, warehouse etc.

Name of executives

Titles, e.g. MD, Sole Prop etc.

Business incorporated under Companies Act, 2006

Share capital-authorized

Share capital-issued

£

£

Date of incorporation

Date of financial year-end

Company registration no.

Country of registration

Name of ultimate holding company

Address

Postcode

No. of locations/premises

No. of employees in group

2. REFERENCES

Bank holding main account

Bank name

Bank address

Postcode

Name of account

Account no.

Sort code

How long has the account been open?

Secondary bankers (if applicable)

Bank name

Bank address

Postcode

Name of account

Account no.

Sort code

How long has the account been open?

Trade reference - Supplier 1

Name

Address

Postcode

Main trading activity

Period of trading with supplier

Contact name

Tel no.

Trade reference - Supplier 2

Name

Address

Postcode

Main trading activity

Period of trading with supplier

Contact name

Tel no.

3. EXTENT OF CREDIT REQUIRED

Please state the amount of credit required (see * below)

Estimated value of annual purchases by you

*Enter here how the amounts above have been estimated (details of products/services required for period)

4. PURCHASE PROCEDURES

Person(s) authorised to place orders on your behalf (Enter name and job title)

Please state any special purchase conditions

What trading terms e.g. net monthly account; do you need to extend to your customers?

5. DECLARATION

I/We hereby request you to open a credit account. I, being an authorised signatory of this organisation, agree that payment of all accounts will be received by you (as the supplier) within your stated credit terms and acknowledge that adherence to this obligation is the essence of the contract between us. In the event that payment of accounts are received by you after the agreed credit period, late payment and / or reasonable debt recovery costs MAY be incurred, either at the agreed rates in accordance with your stated credit terms OR, where no such rates have been agreed, in accordance with the late payment legislation.

Full name of person authorising application

Job title

Signature (Sign below)

Date of application



SKILLS WORKSHOP

APPLICATION

SKILLS WORKSHOP APPLICATION

As a leading waterproofing system designer and manufacturer, Axter is committed to providing high quality upskilling in the installation of our systems and to supporting initiatives to develop and improve training across the roofing industry. Axter skills workshops have been independently assessed and are BCP (Basic Competency Programme) compliant. BCP is open to Experienced Workers and is mapped to National Occupational Standards, recognised by CSCS and NFRC Roofcert and promotes further training and improved quality of installation and workmanship.

1. I AM APPLYING TO ATTEND A SKILLS WORKSHOP IN

- | | |
|-----------------------|---------------------|
| Bitumen (RBM) systems | Hot Melt Systems |
| Single Ply Systems | Cold Liquid Systems |
| Flame Free Systems | |

2. ROOFING CONTRACTOR (ACCREDITED INSTALLER) DETAILS

Company name

Company address

CITB Reg. No.

Please note that a **minimum of four operatives** and a **maximum of six** can attend each session.

3. OPERATIVES

Operative 1 - Full Legal Name

Operative mobile / landline no:

Operative email:

Operative NI number or CSCS number:

Experience / proficiency level in chosen area:
Please attach copy of other operative cards

Operative 2 - Full Legal Name

Operative mobile / landline no:

Operative email:

Operative NI number or CSCS number:

Experience / proficiency level in chosen area:
Please attach copy of other operative cards

Operative 3 - Full Legal Name

Operative mobile / landline no:

Operative email:

Operative NI number or CSCS number:

Experience / proficiency level in chosen area:
Please attach copy of other operative cards

Operative 4 - Full Legal Name

Operative mobile / landline no:

Operative email:

Operative NI number or CSCS number:

Experience / proficiency level in chosen area:
Please attach copy of other operative cards

Operative 5 - Full Legal Name

Operative mobile / landline no:

Operative email:

Operative NI number or CSCS number:

Experience / proficiency level in chosen area:
Please attach copy of other operative cards

Operative 6 - Full Legal Name

Operative mobile / landline no:

Operative email:

Operative NI number or CSCS number:

Experience / proficiency level in chosen area:
Please attach copy of other operative cards

3. WE WANT TO APPLY FOR

Two day Intensive Skills Training Course
Cost £420 (incl.VAT) per operative¹

One day Refresher (By recommendation only)
Cost £210 (incl.VAT) per operative¹

¹Axter operates a skills workshop pay-back scheme, where the cost of upskilling can be refunded. Please refer to our Upskilling Refund Application form for full details.

Skills workshops take place at The Eastern Region Roof Training Group Ltd, Ipswich, IP6 8JP. Skills workshops do not take place at Axter's offices.

Full details will be provided upon confirmation of the Skills Workshop dates.

Note: Tea and coffee will be provided at Axter training centres. However all meals and accommodation must be organised and paid for by the operative.

If you have a trading account with Axter Ltd, an invoice will be generated for the cost of the workshop and be subject to your standard payment terms and conditions.

If you do not have a trading account, you will receive a Pro Forma invoice which will be payable at least ten working days prior to the workshop date. Failure to comply to this requirement will result in cancellation of the workshop.

Purchase Order Number:

Account or Pro Forma

Upon receipt of payment Axter will endeavour to schedule the assessment within the next four weeks.

Please indicate preferable dates during this period:

When the workshop has been booked, we will send a confirmation email of all details and provide suggestions of where to book accommodation.

If your company is CITB levy registered, you may be able to claim CITB training grants. For more information, visit www.citb.co.uk/levy-grants-and-funding/grants-funding/

Further information on the advantages offered by Axter's BCP approved courses is available from Axter Ltd and at the training course.

Data privacy:

Please note that personal information given on this form will be stored and processed by Axter in connection with our skills workshops, on-site assessments and future communication with you on this and related matters and / or as part of our business relationship. This information may also be shared with relevant roofing trade associations in relation to training funding, certification, CSCS smart cards, etc. Axter is committed to the protection of personal data. Our [Privacy Policy](#) gives full details and if you have any queries, please email us on info@axterltd.co.uk

Cancellation / non-attendance:

In the event of cancellation or non-attendance of a booked skills workshop where Axter Ltd has incurred costs, there will be no reimbursement of fees by Axter Ltd. If sufficient notice (minimum seven working days) of cancellation is given and Axter Ltd has incurred no costs, a reimbursement of fees will be processed by Axter Ltd or the workshop re-scheduled and Axter Ltd will charge a small administration fee of £50.



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