



APPLICATION FORM FOR MEMBERSHIP OF CGS

I WISH TO BE ABLE TO OFFER INSURANCE FOR:

DAMP TIMBER WALL TIES *STRUCTURAL WATERPROOFING *CONCRETE REPAIRS

*special conditions apply

Manufacturers' Approved Contractors only:

CRACK STITCHING PILE STABILISATION LATERAL RESTRAINTS

LINTEL STABILISATION MASONRY BEAMING QUICKBASE

CONTACT NAME	
COMPANY NAME	
TRADING AS <i>(IF DIFFERENT)</i>	
ADDRESS	
POST CODE	
TELEPHONE NUMBER	
FAX NUMBER	
EMAIL	
WEBSITE	
COMPANY REGISTRATION NUMBER If applicable	
REGISTRATION DATE	

ARE YOU A :- (PLEASE TICK)	
SOLE TRADER	<input type="checkbox"/>
PARTNERSHIP	<input type="checkbox"/>
PRIVATE LIMITED COMPANY (LTD)	<input type="checkbox"/>
PUBLIC LIMITED COMPANY (PLC)	<input type="checkbox"/>
OTHER <i>(PLEASE SPECIFY)</i>	<input type="checkbox"/>

ADDRESS TO WHICH CORRESPONDENCE SHOULD BE SENT <i>(IF DIFFERENT)</i>	
CONTACT NAME	
ADDRESS	
POST CODE	
TELEPHONE NUMBER	
FAX NUMBER	
EMAIL	
WEBSITE	

ADDITIONAL BRANCH ADDRESSES (IF APPLICABLE) <i>(CONTINUE ON SEPARATE SHEET IF REQUIRED)</i>	
CONTACT NAME	
ADDRESS	

POST CODE	
TELEPHONE NUMBER	
FAX NUMBER	
EMAIL	

NAME & ADDRESS OF PARENT/HOLDING COMPANY (IF APPLICABLET)	
CONTACT NAME	
ADDRESS	
POST CODE	
TELEPHONE NUMBER	
FAX NUMBER	
EMAIL	
WEBSITE	

DETAILS OF DIRECTORS/PRINCIPALS		
NAME	ADDRESS (HOME)	QUALIFICATIONS/EXPERIENCE

INSURANCE DETAILS		
	LIMIT	INSURER
PUBLIC LIABILITY		
EMPLOYERS LIABILITY		
PROFESSIONAL INDEMNITY		

TRADING DETAILS		
DATE COMMENCED TRADING	MONTH	YEAR

NAMES OF SURVEYORS AND THEIR QUALIFICATIONS/EXPERIENCE	
NAMES	QUALIFICATIONS/EXPERIENCE

DO YOU EMPLOY YOUR OWN FULL TIME INSTALLATION/OPERATIVE STAFF?	YES/NO
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ARE THE ABOVE STAFF ON YOUR COMPANY'S PAYROLL?	YES/NO
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DECLARATION

I DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THE PARTICULARS I HAVE GIVEN ON THIS FORM ARE CORRECT AND COMPLETE.

DIRECTOR/PROPRIETOR	
SIGNATURE	
ON BEHALF OF	
DATE	

I enclose herewith last two years accounts (to cover three years trading).

These accounts should not be more than 12 months old. If the accounts relate to other activities apart from the applied for activities. e.g. building work as well as timber, damp treatments, wall ties, structural waterproofing, please provide on a separate sheet the approximate value of the total applied for activities.

Also please enclose a copy of the guarantee or guarantees you issue.

The registration fee is £84 which includes free membership for the balance of the first year and thereafter membership is £84 per year, payable from 1st April. Please forward therefore a cheque for £84 with this application, which will be refunded in the event that you are not accepted. Your membership fee covers all literature, registration and inclusion on the CGS website (timber, damp, wall ties and structural waterproofing), advice on model guarantees and other admin costs.

Shirley Priest
Construction Guarantee Services Ltd
50 Place Farm Way
Monks Risborough
Princes Risborough
Bucks
HP27 9JH