

# CSCA Registration Form 2018 - 30<sup>th</sup> April 2019



Company: \_\_\_\_\_

VAT Reg. No: \_\_\_\_\_

Number of employees directly concerned with closed systems:

- Sole trader       Up to 5 employees       Up to 10 employees  
 Up to 50 employees       More than 50 employees

Contact Name: \_\_\_\_\_ Mobile N<sup>o</sup>: \_\_\_\_\_

Contact Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tel. N<sup>o</sup>: \_\_\_\_\_ Fax N<sup>o</sup>: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

Invoice Address (if different from above): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Regions of operation: (tick all that apply)

- East Midlands
- Eastern Region
- Eire
- London
- North East
- North West
- Northern Ireland
- Scotland
- South East
- South West
- Wales
- West Midlands
- Yorkshire & Humberside

Categories	x _____	@ £500 each	£
Plus vat @ 20%			£
<b>TOTAL</b>			£

Please tick the category that your company offers     Water Treatment     Pre Commission Cleaning

Do you have any relevant accredited Quality Assurance system? \_\_\_\_\_

QA details: \_\_\_\_\_

### STATEMENT OF UNDERTAKING

I understand that registration will be subject to:

- a commitment to produce evidence of documented management procedures to ensure compliance with the CSCA's Code of Practice.
- maintaining the CSCA Service Standards criteria for each service offered, relevant to our CSCA registration.
- informing the CSCA of any impending legal action, relating to closed systems, involving the company named above.
- acknowledging and agreeing to the CSCA Bylaws and CSCA Complaints and Disciplinary Procedure.

**Please sign and date this form and keep a copy of this sheet for your records.**

Signed on behalf of (Company): \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Position held: \_\_\_\_\_ Date: \_\_\_\_\_