

# Application forms

## ELPA Company Membership

### Class II - Installers / Designers

(3+ years experience)



#### Information Sheet (rev 2.2)

Dear Applicant,

Thank you for your interest in joining the Earthing and Lightning Protection Association of South Africa (ELPA). The Class II membership category is described in Article IV, section 2 of the ELPA constitution adopted in February 2019.

ELPA provides you, the prospective Lightning Protection Systems service provider a stable framework to operate within South Africa.

As a Class II member you will receive the following benefits:

- A representative seat on the ELPA Board of Directors - 1 per ten (10) Class II and III member companies;
- A representative vote on matters tabled for consideration – budgetary or proposed work,
- Matters raised on your behalf pertinent to you for voting consideration;
- Representative influence on the Lightning Protection Industry by the position held;
- Company information advertised on the ELPA website;
- Access to all matters addressing the lightning protection industry as available to ELPA;
- Networking opportunities with international specialists, experts and professionals in the lightning protection industry;
- Discounted rates with SABS on the SANS standards documents (negotiations in progress),
- Expect significant savings in marketing packages with media publishing houses as we move forward (negotiations in progress).

The application documentation is attached and needs to be completed and submitted to the ELPA office together with the once-off initiation fee of R6,000.

The class II membership fee is R12,000 per annum to be paid in advance.

#### **1. RECOGNITION OF CONTRIBUTIONS TO ELPA:**

As a fledgling Association many companies have made significant contributions to its success.

If you have contributed to ELPA by participating in the Association establishment arrangements (pre-June 2017), ELPA NEC (National Executive Committee), the ELPA Board and/or the ELPA certification program with certified installers and/or designers, your credentials are recognised.

Please complete Parts A to D of the application form.

Do **NOT** complete parts E to G.

#### **2. NEW ENTRIES TO ELPA:**

If you are new to ELPA, please complete all parts.

In part F you are required to provide three (3) business references. At least one of these references must be from a member of ELPA, ECA, SAIEE or similar listed institution.

Part G must be completed by one of the 3 business references. The reference may send the completed page directly to [info@elpasa.org.za](mailto:info@elpasa.org.za) or to you.

Once we receive these items, we will contact your references.

In addition, the ELPA Constitution (Article 4, Section 5) requires that you provide evidence of third-party inspection of three (3) completed lightning protection installations.

You may provide an Installer Safety Report (ISR) for each to meet this requirement. The Constitution states that you have 24 months after application to provide these project certifications.

To expedite processing of your application, please include the email address for each reference and advise your contacts in advance that ELPA will be following up with them for further information.

Upon receiving your materials and reference replies, we will distribute your application materials to the ELPA Board of Directors for voting on your membership.

Once approved, we will advise you of your new membership with a certificate and information on lightning protection and ELPA.

#### **BANKING DETAILS:\***

Name: Earthing and Lightning Protection Association NPC  
Bank: Standard Bank  
Account No: 310029635  
Branch: Mall of Africa  
Branch Code: 009006  
Type: Bizlaunch "Cheque"

\* When making payments please use your company name as reference  
(Can shorten bank account name to "ELPA")

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**Part A: Company Details**

*(All applicants)*

**1. COMPANY REGISTRATION DETAILS**

Full name of Applicant Company .....  
(Hereafter referred to as "The Company")

Does the company have a "Trading As" name under which business is conducted? No  / Yes   
(If Yes, please specify) .....

VAT Registered? No  / Yes  .....  
(If Yes, please specify VAT registration number)

CIPC Registered? No  / Yes  .....  
(If Yes, please specify CIPC registration number)

**2. COMPANY ADDRESS – PRIMARY PLACE OF BUSINESS**

Postal Address: ..... Postal Code: .....

Physical/Street Address: ..... Postal Code: .....

**3. CONTACT INFORMATION**

1. Primary contact person *pertaining to this application* (if additional information is required)

Name and Surname: .....

Title: Owner  / Director  / CEO  / Partner  / Other  (Please specify) .....

Phone - Office: ..... Mobile: .....

E-mail address: .....

2. Person at the company authorised *to receive all ELPA correspondence and responsible for circulating within the company*

Same as Primary contact person? Yes  / No   
(If No, please specify) Name, Surname and Title .....

- Email address .....

- Contact phone number .....

**4. BILLING INFORMATION**

Company Name to be used for invoicing – (Reference to names stated in registration details above)

Registered name  / "Trading As" name  / Other   
(If other, please specify) .....

Company has an Accounts department? No  / Yes   
(If Yes, please specify) Department Name (Eg Accounts) .....

Contact person name currently handling accounts: Name and Surname .....

Accounts mailing – Email address .....

Address to be used on invoices: Postal  / Physical  / Other   
(If other, please specify) .....

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**Part B: ELPA Code of Ethics**

*(All applicants)*

**Principles fundamental to the Association**

1. The company will emphasise the protection and safety of people;
2. The company will emphasise the protection of property and assets;
3. The company will strive to strengthen the competence of the Association;
4. The company will strive to strengthen the prestige of the Association;
5. The members of the company will conduct business honourably, responsibly and ethically in a manner to enhance the honour and the reputation of the Association and its members.

**Responsibility to Clients**

1. The company will act in all professional matters as a faithful agent to the Client;
2. The company will not disclose information concerning the business affairs or technical processes of any present or former Client;
3. The company will inform each Client regarding any business connections, interests or affiliations which might influence any judgement made by employees of the company or impair the equitable character of the company to provide services;
4. The company will respect and protect the Client's property.

**Relationship with Peers**

1. The company will endeavour to aid the professional development and advancement of the industry pertaining to earthing and lightning protection;
2. The company will not compete unfairly with other companies;
3. The company will extend its friendship and confidence to all Association members without bias toward race, gender or religion;
4. The company will extend its friendship and confidence to all with whom the company enters a business relationship;
5. The company will endeavour to insure the integrity of the Association's certification programs.

*As representative of the company, I hereby state that*

1. *I have read the above Code of Ethics of the Earthing and Lightning Protection Association, and*
2. *I and my company agree to abide by said Code of Ethics while a member of the Earthing and Lightning Protection Association.*

Company Name .....

Date .....

Print Name .....

Signature .....



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**Part D: Company Public Profile**

*(All applicants)*

The following information will be published in ELPA publicity material and information sharing to the public and industry at large who will have an interest in lightning protection, it's application and work to ensure effective lightning protection of their properties and people.

You therefore grant permission for the following information to be made known with the intent and purpose of making your services available to the public and potential enquirers of the lightning protection.

Please complete the information *exactly as you wish it to appear* on any ELPA social media platform such as the ELPA website, LinkedIn, Facebook and Twitter.

**CONTACT INFORMATION TO BE SHOWN ON THE ELPA WEBSITE:**

*The following information will appear at [www.elpasa.org.za](http://www.elpasa.org.za)*

Company Name: .....

Main Contact Person: .....

Street and/or Mailing Address: .....

Phone Numbers Main: ..... Toll Free: .....

Main company contact Email address: .....

Company Website: .....

LinkedIn link: .....

Facebook: .....

Twitter: .....

From time to time you will be contacted when new concepts are implemented both on the ELPA website and collaborative media publications in support of the industry. Any improvements will be shared with you to the benefit of your organisation and ELPA.

**MARKETING MATERIALS INFORMATION TO BE SHOWN ON THE ELPA WEBSITE:**

Please provide details of any company information you have in electronic format that you would like to include on the website which will let potential clients know more about you, your services and your products offered.

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*As representative of the company, I hereby attest that the contact information provided above is accurate to the best of my knowledge. If any of this information changes or is listed incorrectly on the ELPA website, I understand it is my responsibility to contact the ELPA office to have records updated.*

Print Name ..... Signature ..... Date .....

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The following sections must be completed by new entries to the market and lightning protection systems practitioners who have not previously had any interaction or dealings with ELPA. That is, the ELPA Board of Directors are not familiar with your business practices and therefore cannot make any decisions regarding your viability as a service provider in the South African industry.

**Part E: New Company Entry – Experience and Background**

Please provide us with any and all information that reflects your standing in the industry and that you believe will support your position that you can and will add value to the South African communities providing protection against lightning saving lives and protecting property. To start the process, please answer the following questions:

1. How many years have you been trading under the company name given in part A of this application?
2. How many years has your company been providing lightning protection support services?
3. Please provide details of the services offered during those years:
  - a. ....
  - b. ....
  - c. ....
  - d. ....
  - e. ....
  - f. ....
  - g. ....
  - h. ....
  - i. ....
  - j. ....
4. Please provide any other details here explaining why you want to join ELPA or submit on an additional page or electronic file in either .docx or .pdf format

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**Part F: New Company Entry – Contact references**

Please provide contact details for 3 businesses with whom you have worked:  
(\* Denotes Required Field)

\*Name: ..... Title: .....

\*Company: .....

\*Phone number: ..... Mobile: .....

\*Email address: .....

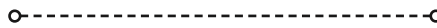


\*Name: ..... Title: .....

\*Company: .....

\*Phone number: ..... Mobile: .....

\*Email address: .....



\*Name: ..... Title: .....

\*Company: .....

\*Phone number: ..... Mobile: .....

\*Email address: .....

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**Part G: New Company Entry – Business reference submission**

To applicant: Please complete the first part of the form below and submit this page to one of your references to complete.

----- Applicant Detail -----

Applicant Company Name: .....

Applicant Company Address: .....

----- Reference Submission -----

**REQUEST:** The above applicant has listed you as a business reference for membership to the Earthing and Lightning Protection Association (ELPA). Please complete this page and return to the applicant for submittal with their membership request or forward directly to [info@elpasa.org.za](mailto:info@elpasa.org.za). ELPA appreciate your time and consideration in this matter.

Date: .....

From: ..... (Name of person providing reference)

Company Name: .....

Address: .....

Email Address: .....

Phone Office #: ..... Mobile: .....

1. How long have you known the applicant listed above? .....

2. What is your relationship with the applicant? .....

3. Please describe the quality of work provided by the applicant: .....

4. How would you define the applicants reputation/character? .....

5. Please provide any additional comments as to your knowledge of the applicant and Company:

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Print Name ..... Signature ..... Date .....