Information Sheet (rev 2.0)



Dear Applicant,

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

"Major Stakeholders - Companies - manufacturers, designers, and installers who perceive their nett worth to be of such value that their specific contribution to the industry is essential to the well-being of the industry".

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

As a Major Stakeholder member (Class I) you will receive the following benefits:

- · A seat on the ELPA Board of Directors;
- A vote on matters tabled for consideration budgetary or proposed work,
- · Raise matters pertinent to you for voting consideration;
 - As a voting member on the Board, you request work to be done;
 - As a voting member you influence how the available budget gets allocated;
- Influence 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;
- · Copy of the latest edition of the ELPA Handbooks
- Discounted registration rates to the Annual ELPA Conference (new annual event to be tabled to the Board of Directors);
- 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 R60.000.

The major stakeholders membership fee is R120,000 per annum to be paid in monthly instalments of R10,000.

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 only complete Parts A to D of the application form.

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 representative organisation.

Part G must be completed by TWO of the 3 business references. The reference may send the completed page directly to 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 installers/designers companies provide evidence of third-party inspection of three (3) completed lightning protection installations.

You may provide an Installation 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"



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 \Box / Yes \Box (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 circu | llating within the company | |
| Same as Primary contact person? Yes \Box / No \Box | | |
| (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 section 1, 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 currently handling accounts: Name and Surname | | |
| Accounts mailing – Email address | | |
| Address to be used on invoices: Postal \Box / Physical \Box / Other \Box (If other, please specify) | | |



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

- 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 |



Part C: Employees Details

(All applicants)

Company membership entitles all employees of the registered ELPA member company to become ELPA individual members – included with the company membership agreement.

The names of staff who may become or who are actively working in the areas of lightning protection systems manufacture, installation, design, or inspections in any capacity whatsoever, should be included in this section.

The names listed here will be included in the database of support work for the industry and will help qualify the extent of training support / skills development needs in the industry from within ELPA member companies.

The intent is to support each ELPA member company through skills development and support from within and to ELPA member companies and thereby increasing the productivity within each company.

LIST INDIVIDUALS EMPLOYED BY THE COMPANY WHO WOULD BE INVOLVED IN THE ACTIVITIES OF ELPA:

| Name | Title (Mr/Ms/Dr) | ID Number | Mobile phone # | Email |
|------|------------------|-----------|----------------|-------|
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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 v | will appear at <u>www.elpasa.org.za</u> | | |
|--|---|--|----------------------------------|
| Company Name: | | | |
| Main Contact Person: | | | |
| Street and/or Mailing Addr | ess: | II Eroo: | |
| Phone Numbers Main: | Tol | ll Free: | |
| Main company contact Em | ail address: | | |
| Company Website: | | | |
| LinkedIn link: | | | |
| Facebook: | | | |
| | | | |
| your organisation and ELP | S INFORMATION TO BE SHOWN | Any improvements will be shared with you to NON THE ELPA WEBSITE: e in electronic format that you would like to in | |
| | | , your services and your products offered. | |
| As representative of the co of my knowledge. If any of responsibility to contact the | ompany, I hereby attest that the co this information changes or is list e ELPA office to have records upo | | te to the best stand it is my |
| Print Name | Signature | Date | |
| | | | |



The following sections parts E, F and G, 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 without references.

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:

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



Part F: New Company Entry – Contact references

Please provide contact details for 3 businesses with whom you have worked: (* Denotes Required Field) Title: *Name: *Company: *Phone number: Mobile: *Email address: 0-----*Name: Title: *Company: *Phone number: Mobile: *Email address: *Name: Title: *Company: *Phone number: Mobile:

*Email address:



Part G: New Company Entry – Business reference submission

| | Applicant De | bmit this page to <u>TWO</u> of your references to complete. |
|-----------------------------------|------------------------------------|---|
| Applicant Company Name: | | |
| Applicant Company Address: | | |
| | Reference Subm | sission ————————— |
| Protection Association (ELPA | a). Please complete this page a | ference for membership to the Earthing and Lightning and return to the applicant for submittal with their ELPA appreciate your time and consideration in this |
| Date: | | |
| From: | | (Name of person providing reference) |
| Company Name: | | |
| Address: | | |
| Email Address: | | |
| Phone Office #: | | Phone #: |
| 1. How long have you known th | ne applicant listed above? | |
| 2. What is your relationship wit | h the applicant? | |
| 3. Please describe the quality of | of work provided by the applicant: | |
| 4. How would you define the a | pplicants reputation/character? | |
| 5. Please provide any additiona | al comments as to your knowledg | e of the applicant and Company: |
| | | |
| Print Name | Signature | Date |