



**2018-2019 MEMBERSHIP APPLICATION
FOR
CONTRACTORS**

We (I), the undersigned: An Individual (Proprietor)
 A Firm (Partner)
 A Corporation (Representative)

hereby make an application for membership in the **Building and Concrete Restoration Association of Ontario**.

In applying for membership, we agree, if this application is accepted, to abide by and be bound by the provisions of the letters patent, bylaws and regulations of the said association, now or hereafter in force.

1. Name of Individual, Firm or Corporation:

2. Contact Information:

Mailing Address:

Telephone # of Company: _____

Fax # of Company: _____

Web Address: _____

3. Description of Business:



4. Principals and Officers:

Position	Name	Telephone No.
President	_____	_____
Vice-President	_____	_____
Treasurer	_____	_____
Secretary	_____	_____

5. Representatives:

Please provide name(s) of person(s) authorized to represent your organization, indicating priority of representatives where more than one such representative is authorized. By providing an email address you are granting Building & Concrete Restoration Association of Ontario permission to email that address.

Representative #1:

Name: _____

Title: _____

Phone #: _____

Email: _____

Representative #2:

Name: _____

Title: _____

Phone #: _____

Email: _____

Representative #3:

Name: _____

Title: _____

Phone #: _____

Email: _____

Representative #4:

Name: _____

Title: _____

Phone #: _____

Email: _____

6. Project References:

Please list five recent projects, identify if the project was a restoration project, the name of the engineer involved, the client for whom the work was performed and the year(s) during which it was done:

Project	Restoration? (Yes or No)	Engineer	Client	Year
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____

7. Project Contacts:

In the same order of the projects listed above, please provide five project contacts, contact's email address and phone number:

Name	Email	Phone number
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

8. Years in Restoration:

Please indicate the length of time the firm has been involved in restoration:

Years: _____



9. Sponsor:

Please indicate which current Association member is sponsoring your membership application.

Sponsor's Name: _____

Company: _____

Phone number: _____

10. Annual Membership Fees:

Payment must accompany application. The fees payable, plus 13% HST, to the Association are determined by the Board of Directors from time to time. By submitting an application, your organization is acknowledging these fees are annual and agrees to pay them going forward. Acceptance of your cheque does not signify approval of your membership.

Basic 2018-19 fee: \$950.00 + HST: \$123.50

TOTAL AMOUNT DUE: \$1,073.50 (HST Registration No. R124358805)

Submitted by:

Signature: _____ Name: _____

Title: _____ Date: _____

Safety Requirement for Membership

In the interest of ensuring the Association instills the importance of health and safety, B&CRAO requires the following documentation to be submitted with any new membership application or renewal.

Please provide:

1. A copy of your company's Health and Safety Policy Statement from the owner or principal safety representative.

Health and Safety Policy

A health and safety policy is a written statement of principles and goals embodying the company's commitment to workplace health and safety. Senior management must be committed to carrying out that policy consistently and completely. Health and safety must enjoy the same high priority as the organization's other major goals.

The policy statement should:

- Contain a written statement of principles and goals;
- Be signed by the chief executive officer, or authorized representative who has the authority to bind the firm;
- Be dated;
- Recognize the need to comply with the *Occupational Health and Safety Act* and construction regulations;
- Acknowledge the right of every employee to work in a safe and healthy environment;
- Spell out management's commitment to providing a safe and healthy work environment by eliminating or minimizing the hazards that can cause accidents and injuries;
- Recognize the priority of safety in relation to other organizational goals and policies; and,
- Encourage cooperation with unions and workers to involve all employees in putting the health and safety policy into practice.

As well, the policy should be:

- Clearly stated in terms that are easily understood;
- Posted in a conspicuous place and distributed and explained to all employees;
- Followed by every employee, including senior management, in all work activities; and,
- Reviewed annually to keep it up-to-date and in tune with current activities of the organization and with the latest legislation.



2. A current copy of the your company's Workers Compensation Clearance Certificate.
3. Please fill in the following form and sign and date it:

<u>Safety Information</u>	
<p>As part of its membership in B&CRAO, our company_____ agrees to abide by all governing regulations and it relates the health and safety and as a minimum, the legislation governing workplaces in Ontario, known as the Occupational Health and Safety Act.</p>	
<p>Our company_____ is in good standing with the Workplace Safety and Insurance Board.</p>	
<p>The company_____ is the company that provides our staff with fall arrest training.</p>	
_____ Name	_____ Date
_____ Signature	