

STRICTLY CONFIDENTIAL

APPLICATION FOR MEMBERSHIP

CONFIDENTIALITY IS ASSURED

The aim of the Association is to ensure that all those who are admitted to Membership are of sufficient standing and integrity to strengthen each and every member of the Association.

All private information will be handled in accordance with the National Privacy Principles distributed by the Office of the Federal Privacy Commissioner.

When accepted for membership your business name and contact details will be added to the AIA website and given to consumers requesting details of businesses providing your service(s). These business details may also be given to the association's service providers. You may request that your details not be given to any other party.

Where there may be insufficient space for your particular circumstances, or where there may be other details which you believe may be of help in your application, then please attach additional sheets.

No application will be considered if **all** the declarations are not signed and witnessed.

PLEASE COMPLETE ALL SECTIONS

1. Applicant's Full Name
2. Business Address
..... Post code.....
3. (a) Phone Numbers – Private Bus Mobile.....
(b) Fax No.
4. (a) Business Name
(b) ABN
Registered Business No. Registered Since
5. Mailing address
..... Post code.....
Email address Website address.....
6. Structure of Business
(a) Sole Trader Partnership Company Other
(b) Partners or Directors Names
.....
.....
.....
.....
7. Other Business (include names of Directors, Partners etc. if applicable)
(a) Presently Operated

(b) Previously Operated

8. Number of Employees (including Proprietors, Directors)

9. Applicant's Appliance Industry Qualifications

10. Details of Applicant's Experience in the Appliance Industry

Positions held	From	To
.....
.....
.....

11. Qualifications of Other Key Staff

Name	Position	Qualifications/Experience
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.....
.....

12. (a) Licences held within the Business (eg Second-Hand Dealer's Licence, Electrical Contractor's Licence etc)

Type of Licence	Name in which held	Issuing Authority	Lic. No.	Valid to
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.....
.....

(b) Public liability Insurance held? Amount \$ Insurance Company

(Attach Certificate of Currency)

13. Date business commenced Trading

14. Date present Owners acquired Business

15. Franchises/Agencies Held

16. Detail the activities in which the business is involved (please provide full details including the types of appliances sold and/or serviced).

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.....

17. Is the business operated on a full-time basis? YES/NO

If NO, give details
.....

18. Has the applicant, or their business, been directed to attend, or been a party to proceedings before a tribunal (such as a Consumer Affairs Tribunal) or court of law, which was in any way directly or indirectly related to trading in the appliance industry and which proceedings resulted in a finding against the applicant or their business? YES/NO
If YES, please attach separately all relevant details.

19. Has any person, being a proprietor, director or manager of the business in the last two years been declared bankrupt or had estates assigned to the benefit of creditors? YES/NO

20. Has any person, being a proprietor, director or manager of the business been a director of a corporation which, at the time of their directorship, was wound up, placed in receivership or placed under official management of a Scheme of Arrangement? YES/NO

21. **PERSONAL REFERENCES** (please give the names, suburbs, city or town and phone numbers of at least two people not directly related to you whom you authorise the Association to contact).

Name	Suburb, City or Town	Phone Nos. Private	Business
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.....
.....

22. Are you known to any members of the Association or people in the industry? If so who?

Names & Phone Nos.
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.....

DECLARATION

I have signed Declarations 1 to 4 which are part of this Application, and am returning this form and my cheque for the joining fee and one year's membership fees (*).

Signed:

Date

Declaration 1

TO THE COMMITTEE OF THE APPLIANCE INDUSTRY ASSOCIATION.

I submit the details of the accompanying application form as the basis for your consideration of my application for Membership of the AIA.

I specifically warrant:-

- (i) That the details given for your consideration are true, correct and complete.
- (ii) That I have read and agree to abide by the AIA Code of Ethics which I received with the application form.
- (iii) That I agree to follow the various applicable "Codes of Practice" issued by Government Departments or instrumentalities from time to time. In states with no Industry Code of Practice the NSW Whitegoods Repair Code or its successor will apply.

DATE: SIGNED (Applicant)

DATE: SIGNED (Witness)

NAME OF WITNESS

(Please Print)

Declaration 2

I having applied for Membership of the AIA specifically acknowledge:-

- (i) That the use of the AIA trade mark is a privilege conferred only upon Members of the Association, and that I must cease the use of such trade marks or emblems which may be on premises or vehicles, in advertising or on stationery immediately upon my ceasing to be a member of the AIA through resignation, non-renewal or expulsion from the Association.
- (ii) That breaches of the Code of Ethics of the AIA or of a relevant Code of Practice, or my refusal to abide by a Department of Fair Trading or AIA Dispute Resolution ruling for settling a dispute with a customer, or any court finding of fraud or malpractice in respect of my business will be considered by the committee of the Association and may be dealt with as per the Rules of the Association.
- (iii) That the Association membership, through the elected Committee of Management and the rules of the Association, has the final say on matters regarding membership and disciplining or expulsion of members.

DATE: SIGNED (Applicant)

DATE: SIGNED (Witness)

NAME OF WITNESS

(Please Print)

Declaration 3

Ihereby authorise the

NSW	Department of Fair Trading
NORTHERN TERRITORY	Department of Consumer Affairs
QUEENSLAND	Office of Fair Trading
SOUTH AUSTRALIA	Department of Consumer Affairs
TASMANIA	Department of Consumer Affairs
VICTORIA	Office of Fair Trading and Business Affairs and the Small Claims Tribunal in the Department of Justice
WESTERN AUSTRALIA	Department of Consumer Affairs

To provide to the Appliance Industry Association information regarding any complaints received by them and the settlement terms, or any action taken by them in respect of such complaints, for my present and former trading entities.

PRESENT TRADING NAME(S)



PAST TRADING NAME(S)

.....

.....

.....

.....

.....

.....

DATE: SIGNED (Applicant)

DATE: SIGNED (Witness)

NAME OF WITNESS

(Please Print)

Declaration 4

BASIC TOOLS AND EQUIPMENT

ALL APPLIANCES – Field or Workshop

- Basic Hand tools
- Bench Vice
- Multimeter. 0.1 ohms to 10 megohms
- Amp meter 0.2 amps to 20 amps
- Insulation tester, 500 volt (Megger)
- Drop sheet
- Residual Current safety device
- Extension cord
- Torch
- Appliance trolley
- Appliance/fridge cover (for transportation)
- Taps, stand pipes and drains for testing Washing Machines/Dishwashers

REFRIGERATION (additions) Field or Workshop

- *Refrigerant Gauge and manifold sets
- *Vacuum pump
- *CFC Recovery unit and cylinders or recovery bags
- *Refrigerant charging cylinder/s as required
- *Refrigerants as required
- Tube cutters
- Hot air gun or Hair dryer
- Welding equipment, Oxy/LP or Oxy/Acetylene
- Electronic leak detector, halide lamp, leak detector liquid
- Refrigeration thermometer, multipoint electric and pocket
- Nitrogen cylinder, gauges and equipment
- Temperature recorder

NOTE: “*” items may require a multiple sets, to avoid cross contamination of incompatible lubricants and/or refrigerants.

LAUNDRY APPLIANCES (additions)

Including Dishwashers – Field or Workshop

- Corben clip pliers, clamps or tongs
- Bearing agitator and pulley pullers
- Drain hose clamp tool.

COOKING APPLIANCES (addition) Field or Workshop

- Oven thermometer pocket or electric
- Leak detector (for gas stoves)
- Manometer (for gas stoves)

I hereby certify that I have all the tools in the above list indicated by a (√) in the box.

Signature:

Name: