

# SSIP Registered Membership Application Form



Please note that there are fees associated with your application. These are outlined in the 'Declaration' section of this form.

1. Organisation Details			
Organisation Name			
Address		Company Registration Number	
Contact Name		Position	
Telephone		E-mail	Web Site Address
Main Scope of Your Organisation's Activities			
Year Organisation Established	Year Organisation Started H&S Assessments	Number of Registered Companies on Scheme	Name of Product
Name and address (if different from above) where invoices to be sent:			
Scopes of Companies Assessed (tick all that apply)			
Non Construction	<input type="checkbox"/>	Designer	<input type="checkbox"/>
Construction	<input type="checkbox"/>	CDM Co-Ordinator	<input type="checkbox"/>
Principal Contractor	<input type="checkbox"/>	Group Wide	<input type="checkbox"/>
Assessment Cycle (tick all that apply)			
Annual	<input type="checkbox"/>	Triennial	<input type="checkbox"/>
Biennial	<input type="checkbox"/>	Other	<input type="checkbox"/>
(please specify)			

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2. Quality Management Systems			
The following information will help assist the auditing process – it should not be seen as an exhaustive list, but should nevertheless highlight any areas of weakness which should be addressed prior to audit			
Organisations that hold a valid, within scope, ISO9001 certificate issued by an UKAS accredited certification body (or equivalent) <b>do not</b> need to complete section 2 of this application form, and will not have to undergo Part 1 of the audit.			
Valid ISO9001 certificate held	Yes	<input type="checkbox"/>	Enclose a full copy of your certificate and go to section 3 of this application form
	No	<input type="checkbox"/>	Complete sections 2 & 3 of this application form
<b>Does your quality management system include the following:</b>			
Quality policy, objectives and manual	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Document and record control procedures	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Enquiry and application procedures	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Effective communication with customers	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Customer satisfaction assessments	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Corrective and preventative action procedures	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
3. Safety Pre-qualification Schemes			
To be completed by <b>ALL</b> applicants			
The following information will help assist the auditing process – it should not be seen as an exhaustive list, but should nevertheless highlight any areas of weakness which should be addressed prior to audit			
<b>Do your assessment operations encompass the following:</b>			
Compliance with stage 1 core criteria (CDM2007 ACOP Appendix 4)	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Verification of assessor competence:			
Qualifications	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Experience	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Task Knowledge	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Training	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Quality assurance checks	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Conflict of interest / ethical conduct issues	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Efficient customer communication	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

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Please provide information in relation to the following:

1. Number of established buyer relationships
2. Demonstration that your business is stable and solvent
  
3. If involved in consultancy, demonstration that your organisational arrangements ensure independence / separation from your assessment activities
  
4. Please state your reasons for seeking SSIP Registered Member status
  
5. What benefits would your membership bring to SSIP?

## 4. Declaration

I, the undersigned, declare that the information given is correct to the best of my knowledge, and that the organisation wishes to apply for Registered membership of the Safety Schemes in Procurement (SSIP) Competence Forum.

Please enclose a cheque for £50 made payable to NHBC Services Ltd to cover the administration fee – please note this fee is non-refundable. [Please note also that the administration fee only applies to initial application and audit - not reassessment]

I understand that this application form will be assessed by the SSIP Forum Management Group (FMG) to confirm applicability, and if deemed applicable, at this point the applicant is required to pay a non-refundable audit fee of £725 per day plus travel expenses. Please note that, on average, audits take between 1 and 1 ½ days to complete.

I understand that once the organisation successfully completes the audit and is granted Registered membership to the SSIP Forum, an annual membership fee becomes due and will be invoiced within 30 days (based on the number of companies within your scheme) – please contact the SSIP Coordinator for further details.

As a Registered member we will abide by the terms and conditions for membership described in the 'Deem to Satisfy' (D2S) and 'Terms of Reference' (TOR) and will provide a signed copy of both documents for your records following completion of our membership.

This application together with a cheque for £50 should be sent to the SSIP Coordinator at: NHBC Services Ltd, NHBC House, Davy Avenue, Knowlhill, Milton Keynes, Bucks, MK5 8FP.

Signed

Print Name

Position

Date