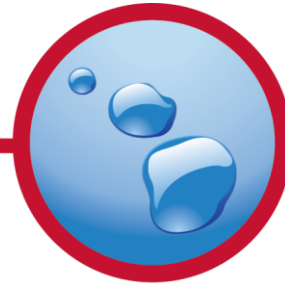


Legionella

Risk Assessment & Disinfection Scheme



Application to become an Approved Business (A/Bus/1)

SECTION 1: DETAILS OF PROPOSED APPROVED BUSINESS

Company Name:	
Type of Company: (please tick)	<input type="checkbox"/> Sole Trader <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Company <input type="checkbox"/> Other
Contact Name:	
SNIEF Membership Number: (If Known)	
Address:	
Post Code:	
Office Telephone:	
Fax:	
Mobile:	
E-Mail:	
Website:	

SECTION 2: PROPOSED WORK TO BE CARRIED OUT BY APPROVED BUSINESS

Please advise the scope of work your business proposes to carry out:

Type of work	Yes/No
Disinfection of Water Systems	
Risk Assessment of Water Systems	
Risk Assessment and Disinfection of Water Systems	

SECTION 3: PROPOSED APPROVED OPERATIVES (AOs)

(If you are a sole trader you can act as both the Approved Business and the Approved Operative but you must complete a separate application to be registered as an Approved Operative)

Name of Approved Operative (AO):	
National Insurance Number:	
Name of Approved Operative (AO):	
National Insurance Number:	

You may nominate more AOs if required. Please use a separate sheet. (An AO/I form must be completed for each nominated Approved Operative and must accompany this form).

SECTION 4: APPROVED OPERATIVES (AO) ALREADY EMPLOYED

(Approved Operatives who are already employed must be members of the SNIPEF Legionella Risk Assessment and Disinfection scheme)

Name of Approved Operative (AO):	
National Insurance Number:	
AO Registration Number:	

SECTION 5: AREAS IN WHICH YOUR BUSINESS WISHES TO OPERATE THE SCHEME

(Please tick the Local council areas your firm proposes to operate this scheme)

Tick as appropriate	Local Authority	Tick as appropriate	Local Authority
	All Scottish Local Authority Areas		All Northern Ireland Local Authority Areas
	Aberdeen City Council		Antrim
	Aberdeenshire Council		Ards
	Angus Council		Armagh
	Argyll & Bute Council		Ballymena
	City of Edinburgh Council		Ballymoney
	Clackmannanshire Council		Banbridge
	Dumfries & Galloway Council		Belfast
	Dundee City Council		Carrickfergus
	East Ayrshire Council		Castlereagh
	East Dunbartonshire Council		Coleraine
	East Lothian Council		Cookstown
	East Renfrewshire Council		Craigavon
	Falkirk Council		Derry
	Fife Council		Down
	Glasgow City Council		Dungannon & South Tyrone
	Highland Council		Fermangh
	Inverclyde Council		Larne
	Midlothian Council		Limavady
	Moray Council		Lisburn
	North Ayrshire Council		Magherafelt
	North Lanarkshire Council		Moyle
	Orkney Council		Newry & Mourne
	Perth & Kinross Council		Newtownabbey
	Renfrewshire Council		North Down
	Scottish Borders Council		Omagh
	Shetland Council		Strabane
	South Ayrshire Council		
	South Lanarkshire Council		
	Stirling Council		
	West Dunbartonshire Council		
	West Lothian Council		
	Western Isles Council		

SECTION 6: INSURANCE

If your firm wishes to undertake Risk Assessments of hot and cold water systems you must hold appropriate Professional Indemnity (PI) insurance of at least £250,000. Please supply written evidence from your insurer that you hold such insurance or provide us with the name of your insurance broker or insurer so we may check that you hold such cover.

Name of Insurer or Broker:	
Address:	
Contact telephone number:	
Professional Indemnity Policy Number:	
Indemnity limit:	

SECTION 7: FEES

The following annual fees will apply to the scheme:

Designation	Fee	VAT	Total Fee
Approved Business Fee <i>(if current SNIPEF Member)</i>	£109	20%	£130.80
Approved Business Fee <i>(if not current SNIPEF member)</i>	£435	20%	£522.00

SECTION 8: DECLARATION

To apply to become an Approved Business under the Legionella Risk Assessment and Disinfection Scheme you agree, by completing and signing this application, that you will accept the terms of the Scheme conditions (as prescribed in the Scheme Guide) and that all work will be carried out in compliance with the scheme terms. To read the Scheme Guide, please [click here](#).

Name:	
Position in Company:	
Signature:	
Date:	

By signing this document electronically or by using a printed signature, you understand that these signatures are as binding as any other.

Please complete and return this form by email to schemes@snipef.org. Once we have approved your application we will forward details of our bank so that payment can be made by BACS or by faster payment. **Please do not send cheques.**

Note: You will be required to be a member of the WaterSafe scheme before your application is approved.

Personal data is processed for commercial, administrative and statutory purposes. All such personal data is collected and held in accordance with all applicable Data Protection Laws.

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