

# Membership Application Form

## Before you begin

This application form contains **10 steps** and will take approximately **20 minutes** to complete. You will need the following information to complete your application:

- Operatives (names, dates of birth, and National Insurance numbers)
- Proof of Public Liability Insurance and Employers' Liability Insurance (if applicable)
- Copies of qualifications/certificates relevant to the type of work you undertake

Please note that a **non-refundable** application fee of **£75 + VAT** must be paid prior to the finalisation of your membership.

If you need any assistance in completing this form, please contact our Membership Department at [membership@snipef.org](mailto:membership@snipef.org) or call 0131 556 0600.

## Step 1 – About your company

|                         |  |
|-------------------------|--|
| Registered company name |  |
| Address Line 1          |  |
| Address Line 2          |  |
| Town/City               |  |
| Postcode                |  |
| Company email           |  |
| Company phone           |  |

What type of company is it?

☐ Limited Company

☐ Partnership

☐ Sole Trader

If you are a limited company, what is your Companies House number?

When was the company established?

Annual turnover?

- ☐ Less than £632,000
 ☐ £632,000 to £10.2 million  
☐ £10.2 million to £36 million
 ☐ Above £36 million

Are you a member of any of the following?

- ☐ GasSafe
 ☐ MCS
 ☐ TrustMark  
☐ Select
 ☐ NICEIC
 ☐ Lead Contractors Association  
☐ OFTEC
 ☐ Other

## Step 2 – Contact information

**Main Contact** *(the person who will receive membership communications and our newsletter)*

|       |  |
|-------|--|
| Name  |  |
| Phone |  |
| Email |  |

**Nominated Qualified Person** *(the person you are nominating to keep SNIPEF updated about the operatives you employ and their qualifications. This can be the same person as your main contact above.)*

|       |  |
|-------|--|
| Name  |  |
| Phone |  |
| Email |  |

**Finance Contact** *(the person that invoices should be sent to)*

|       |  |
|-------|--|
| Name  |  |
| Phone |  |
| Email |  |

What is your preferred method of contact?

- ☐ Phone
 ☐ Email
 ☐ Text Message
 ☐ WhatsApp

*We will typically contact you via email for most communications. However, if you prefer another method for specific updates or urgent matters, please let us know by indicating your preferred method above.*

|             |  |
|-------------|--|
| Website     |  |
| X (Twitter) |  |
| Facebook    |  |
| Instagram   |  |
| LinkedIn    |  |

### Step 3 – Type of work

What type of clients does the company do work for?

- ☐ Domestic
 ☐ Commercial
 ☐ Industrial

Please list the primary activities of your company (*primary activities are what your business mainly does day-to-day. E.g. plumbing and heating system installation and repair*)

Please list the secondary activities of your company (*secondary activities are other services your company offers that aren't its main focus. E.g. drain maintenance*)

### What type of work do you do? (Select all that apply)

*The categories of work you select will appear on your company listing on the SNIPEF customer searchable website, [needaplumber.org](http://needaplumber.org). The more complete your listing is, the better it will perform in searches and help promote your business.*

#### Commercial & Landlord Services

- |                                                                  |                                                                  |
|------------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> Commercial plumbing maintenance         | <input type="checkbox"/> Emergency plumbing for landlords        |
| <input type="checkbox"/> High-capacity drainage solutions        | <input type="checkbox"/> Landlord gas safety certificates (CP12) |
| <input type="checkbox"/> Large-scale heating system installation | <input type="checkbox"/> Legionella risk assessment              |
| <input type="checkbox"/> Water efficiency audits                 | <input type="checkbox"/> All of the above                        |

### **Drainage & Sewer Services**

- |                                                           |                                                                   |
|-----------------------------------------------------------|-------------------------------------------------------------------|
| <input type="checkbox"/> CCTV drain surveys               | <input type="checkbox"/> Gutter & downpipe cleaning               |
| <input type="checkbox"/> Rainwater harvesting systems     | <input type="checkbox"/> Septic tank installation and maintenance |
| <input type="checkbox"/> Sewer line repairs & replacement | <input type="checkbox"/> All of the above                         |

### **Heating & Gas**

- |                                                                  |                                                              |
|------------------------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> Boiler installation, repair & servicing | <input type="checkbox"/> Carbon monoxide testing             |
| <input type="checkbox"/> Central heating installation & upgrades | <input type="checkbox"/> Gas appliance installation          |
| <input type="checkbox"/> Gas leak detection & repair             | <input type="checkbox"/> Gas pipe installation & repair      |
| <input type="checkbox"/> Gas safety checks & certifications      | <input type="checkbox"/> Oil heating                         |
| <input type="checkbox"/> Power flushing                          | <input type="checkbox"/> Radiator installation & maintenance |
| <input type="checkbox"/> Smart heating controls                  | <input type="checkbox"/> Solid fuel heating                  |
| <input type="checkbox"/> Underfloor heating                      | <input type="checkbox"/> Unvented hot water systems          |
| <input type="checkbox"/> All of the above                        |                                                              |

### **Lead Work & Pipe Replacement**

- |                                                            |                                                      |
|------------------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> Lead flashing & roofing repairs   | <input type="checkbox"/> Lead pipe replacement       |
| <input type="checkbox"/> Lead testing & safety assessments | <input type="checkbox"/> Lead water main replacement |
| <input type="checkbox"/> Lead welding & fabrication        | <input type="checkbox"/> All of the above            |

### **Plumbing**

- |                                                           |                                                        |
|-----------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Blocked drains & drain cleaning  | <input type="checkbox"/> Burst pipe repairs            |
| <input type="checkbox"/> Disabled adaptations             | <input type="checkbox"/> Emergency plumbing repairs    |
| <input type="checkbox"/> Kitchen & bathroom installations | <input type="checkbox"/> Leak detection & repair       |
| <input type="checkbox"/> Pipe installation & replacement  | <input type="checkbox"/> Shower repairs & installation |
| <input type="checkbox"/> Tap repairs & replacement        | <input type="checkbox"/> Toilet repairs & installation |
| <input type="checkbox"/> Water pressure adjustment        | <input type="checkbox"/> Water softener installation   |
| <input type="checkbox"/> All of the above                 |                                                        |

### **Renewable & Sustainable Services**

- |                                                 |                                                                   |
|-------------------------------------------------|-------------------------------------------------------------------|
| <input type="checkbox"/> Air-source heat pumps* | <input type="checkbox"/> Biomass boiler installation & servicing* |
| <input type="checkbox"/> Energy efficiency      | <input type="checkbox"/> Greywater recycling systems              |

- |                                                     |                                                                    |
|-----------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> Ground-source heat pumps*  | <input type="checkbox"/> Hydrogen-ready boilers                    |
| <input type="checkbox"/> Low flow plumbing fixtures | <input type="checkbox"/> Rainwater harvesting systems              |
| <input type="checkbox"/> Smart heating controls     | <input type="checkbox"/> Smart water leak detection                |
| <input type="checkbox"/> Solar panels*              | <input type="checkbox"/> Water-efficient tap & toilet installation |
| <input type="checkbox"/> All of the above           |                                                                    |

*If you selected any of the following - Ground Source Heat Pumps, Air Source Heat Pumps, Solar Panels, or Biomass Boilers - please email evidence of your relevant qualifications along with your completed application form.*

## Step 4 – About your Proprietors, Partners and Directors

List the names and National Insurance Numbers of the business' Proprietors, Partners and Directors. Anyone listed here will not be charged for.

**Note:** *If the applicant is connected to a plumbing, heating or related trade business that became bankrupt or went into liquidation, your membership application cannot be considered for 12 months from the date that business ceased to trade.*

| Name | Designation (e.g. Partner) | NI Number | Do they carry out plumbing & heating work? |
|------|----------------------------|-----------|--------------------------------------------|
|      |                            |           |                                            |
|      |                            |           |                                            |
|      |                            |           |                                            |

## Step 5 – About your operatives

List the names and National Insurance Numbers of any **plumbers** and **gas operatives** you employ. All fields must be completed for us to progress with your application. *If you need more space to fill in operative details, please continue on page 9 of this application.*

| Name | Date of birth | NI Number | Operative type (Plumber/Gas/Other) |
|------|---------------|-----------|------------------------------------|
|      |               |           |                                    |
|      |               |           |                                    |
|      |               |           |                                    |
|      |               |           |                                    |
|      |               |           |                                    |
|      |               |           |                                    |

Does your business use subcontractors? (This is for information purposes only)

☐ Yes

☐ No

## Step 6 – About your apprentices

List the names and National Insurance Numbers of the **plumbing and gas apprentices** you employ. Apprentices are not charged for. *If you need more space to fill in apprentice details, please continue on page 9 of this application.*

| Name | Date of birth | NI Number | Apprentice type<br>(Apprentice Plumber/<br>Apprentice Gas/<br>Apprentice Other) |
|------|---------------|-----------|---------------------------------------------------------------------------------|
|      |               |           |                                                                                 |
|      |               |           |                                                                                 |
|      |               |           |                                                                                 |
|      |               |           |                                                                                 |

Total number of other staff (e.g. office staff)

## Step 7 – Insurance

SNIPEF members **must** have at least £2 million in Public Liability Insurance and, if your company has employees, at least £5 million in Employer's Liability Insurance. Please attach copies of your business' insurance certificate(s) to this application.

What insurance do you have? (Select all that apply)

☐ Public Liability Insurance

☐ Employers' Liability Insurance

|                         |  |
|-------------------------|--|
| Insurance Policy Number |  |
| Policy Expiry Date      |  |

## Step 8 – Where did you hear about SNIPEF?

Tell us where you heard about SNIPEF

- |                                                 |                                          |                                                 |
|-------------------------------------------------|------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Previously a member    | <input type="checkbox"/> Trade merchants | <input type="checkbox"/> PlumbHeat magazine     |
| <input type="checkbox"/> Social media           | <input type="checkbox"/> Scottish Water  | <input type="checkbox"/> Northern Ireland Water |
| <input type="checkbox"/> Internet search        | <input type="checkbox"/> Another member  |                                                 |
| <input type="checkbox"/> Other (please specify) |                                          |                                                 |

## Step 9 – Reason for joining SNIPEF

Select as many as apply

- ☐ Promote your business as a SNIPEF member and use the SNIPEF logo
- ☐ Generate new business via SNIPEF's Need a Plumber website and referrals from Scottish Water/NI Water
- ☐ Join the Approved Certifier of Construction Scheme (ACCS)
- ☐ Access to professional advice and support on Employment, Health & Safety and Technical issues
- ☐ Become a member of the WaterSafe Approved Contractor Scheme
- ☐ Access to member-only discounts on a variety of products and services
- ☐ Join the Welfare, Holiday and Sick Pay Schemes
- ☐ Other (please specify)

Did one of our Business Development Officers help you with this application? If so, please enter their name below.

## Step 10 – Payment and declaration

**Application Fee:** Please note that a **non-refundable** application fee of **£75 + VAT** must be paid prior to the finalisation of your membership.

**Processing time for your application:** You should anticipate a 2-week period from payment of the application fee for the necessary quality checks to complete. Once those have completed successfully we will contact you by email with an update and next steps and a request to pay your annual membership. This can be paid as a one-off payment or by Direct Debit.

How do you wish to pay for your annual SNIPEF membership?

- ☐ Direct Debit (over 10 months) ☐ One Off Payment

Please check the boxes to confirm the following statements:

- ☐ I consent to SNIPEF contacting my Local Authority Trading Standards Office or appropriate statutory bodies to confirm my trading history.
- ☐ I understand work my business has completed will be inspected by SNIPEF within six months of becoming a SNIPEF member.
- ☐ I have read and understand how SNIPEF Management Ltd manages personal data. (Privacy Policy is available online at [www.snipef.org/privacy](http://www.snipef.org/privacy))
- ☐ I declare that to the best of my knowledge all information submitted is correct. I fully understand the submission of any misleading information will jeopardise my membership. I confirm all certificate copies provided are from the originals.

**Declaration:** I declare that to the best of my knowledge all information submitted is correct. I fully understand the submission of any misleading information will jeopardise my membership. I confirm all certificate copies provided are from the originals.

Name

Job Title

*Please email your completed application form (along with copies of your insurance and any relevant qualifications, as referenced in step 3) to [membership@snipef.org](mailto:membership@snipef.org).*

## Step 5 (continued) – About your operatives

List the names and National Insurance Numbers of any **plumbers** and **gas operatives** you employ. All fields must be completed for us to progress with your application.

| Name | Date of birth | NI Number | Operative type<br>(Plumber/Gas/Other) |
|------|---------------|-----------|---------------------------------------|
|      |               |           |                                       |
|      |               |           |                                       |
|      |               |           |                                       |
|      |               |           |                                       |
|      |               |           |                                       |
|      |               |           |                                       |
|      |               |           |                                       |
|      |               |           |                                       |
|      |               |           |                                       |
|      |               |           |                                       |
|      |               |           |                                       |
|      |               |           |                                       |

## Step 6 (continued) – About your apprentices

List the names and National Insurance Numbers of the **plumbing and gas apprentices** you employ. Apprentices are not charged for.

| Name | Date of birth | NI Number | Apprentice type<br>(Apprentice Plumber/<br>Apprentice Gas/<br>Apprentice Other) |
|------|---------------|-----------|---------------------------------------------------------------------------------|
|      |               |           |                                                                                 |
|      |               |           |                                                                                 |
|      |               |           |                                                                                 |
|      |               |           |                                                                                 |
|      |               |           |                                                                                 |
|      |               |           |                                                                                 |