



DESIGN CONSULTANT MEMBERSHIP APPLICATION

MEMBERSHIP APPLICATION AND DECLARATION

Application for membership by/on behalf of:

Category of membership applied for:

I/we hereby apply for membership of the SA Institute of Steel Construction / SA Light Steel Frame Building Association*.

I/we declare as follows:

1. I/we subscribe to the mission and objectives of the Association.
2. I/we subscribe to the Code of Ethical Conduct of the Association.
3. I/we understand and accept that the Board of Management of the Institute is empowered to accept or reject my/our application, or to cancel my/our membership should I/we either be judged to be in contravention of the Code of Ethical Conduct or fail to pay our membership subscriptions.
4. The enclosed questionnaire has been accurately completed and no information which might affect my/our application has been withheld.

Signed on behalf of on this day of

Signature

In the presence of Witness

Name and position of signatory

** membership of SASFA is via membership of the SA Institute of Steel Construction, as SASFA is a division of the Institute*

Note: Application will only be considered if the applicable SASFA questionnaire, completed in full, is attached.



DESIGN CONSULTANT MEMBERSHIP APPLICATION

SASFA MEMBERSHIP APPLICATION: SUPPORTING INFORMATION

DESIGN CONSULTANT

| 1. PERSONAL DETAILS | | | |
|---------------------|--|------------------------|-------------|
| 1.1 | Name (in full): | Title: | |
| 1.2 | Identification number: | | |
| 1.3 | Profession: | Structural engineer | |
| | | Architect | |
| | | Quantity surveyor | |
| | | Draughtsman / detailer | |
| | | Town planner | |
| 2. CONTACT DETAILS | | | |
| 2.1 | Employer: | | |
| 2.2 | Main business of employer: | | |
| 2.3 | Postal address: | | Code: |
| 2.4 | Physical address: | | |
| 2.5 | Phone number at work: | Cell: | |
| 2.6 | Phone number at home: | Fax: | |
| 2.7 | E-mail address: | | |
| 3. QUALIFICATIONS | | | |
| 3.1 | List all degrees and diplomas, with institution and date of award: | | |
| | | | |
| | | | |
| | (Attach certified copies of all diplomas, certificates, etc.) | | |
| 3.2 | Number of years of experience in the profession listed above: | | |

| | | | |
|-----|--|-----------------------|-------------------------------------|
| 3.3 | Professional registration: | | |
| | Registering body: | | |
| | Registration number: | | |
| 3.4 | List five of the projects you have been involved with during the past 5 years: | | |
| | Project | Date completed | Value (R) |
| | | | Involvement (position, role) |
| | | | |
| | | | |
| | | | |
| | | | |

4. REFERENCES

The SAISC is free to phone the following individuals, who know the applicant, to obtain references in terms of character and capability:

| Person | Telephone | Cell |
|--------|-----------|------|
| | | |
| | | |
| | | |
| | | |

5. DECLARATION

I hereby declare that I am proficient in the profession listed under 1.4 above, within the field of steel structures.

Signature: Date:

6. ENDORSEMENT BY A SUITABLY QUALIFIED, INDEPENDENT PERSON WHO IS A MEMBER OF THE SAISC / SASFA:

I hereby declare:

- I am familiar with the applicant, and am of the opinion that I can express a judgement about his/her proficiency in the use of steel in buildings.
- In my opinion the applicant is a reputable person, and is satisfactorily proficient to practice his/her profession in the area of light steel frame building marked under 1.4 above.

Name:

Telephone number: Cell:

Signature: Date: