## TOGETHER - DELIVERING SUSTAINABLE ENERGY INFRASTRUCTURE

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## IPLOCA MEMBERSHIP APPLICATION

## **Associate Member**

NAME OF COMPANY				
ADDRESS				
TELEPHONE		FAX		
WEBSITE		E-MAIL		
NAMES OF PRINCIPAL OFFICER	RS			
SERVING THE PIPELINE CONS	STRUCTION INDUSTRY:	ONSHORE	☐ OFFSHORE	
DO YOU HAVE AN HSE MANA	AGEMENT SYSTEM IN PLACE?	☐ YES	□ NO	
If yes, which of the following certificates do you have?				
□ ISO 9001 □ OHSA	S 18001	☐ Other (provide name)		

Please attach copies of the certificates

Fee for Associate Members: CHF 5,000 per year. There is also a Joining Fee of CHF 5,000 payable with the membership fee once the application is approved.

The following information should accompany your application:

- 1. Your company brochure and where applicable your last published Annual Report.
- 2. A brief history of your company giving details of the equipment, services, supplies, materials, or tools you provide to either the onshore or the offshore pipeline construction industry
- 3. The number of years of experience your company has in the industry (minimum of 3 years required).
- 4. Details and numbers of your workforce by category including managerial staff.
- 5. List of major projects over the last 3 years with which your company has been associated and the part your company has played (ref. IPLOCA By-Laws, para. 3.2.1. and 3.2.2.)
- 6. Letters of recommendation from two fully paid-up Regular Members of IPLOCA (not Associate Members) who have been members for at least two years.
- 7. Confirmation that you will abide by the IPLOCA Health & Safety and the IPLOCA Social & Environmental policies

and may, if applicable, submit your health & safety statistics to the IPLOCA Secretariat every year

- 8. Confirmation that you agree with and will adopt the IPLOCA Health & Safety Philosophy:
  - As an IPLOCA member, we are committed to the Occupational Health and Safety of our people
  - We believe that all incidents and accidents are avoidable
  - We believe leadership is key to successful Occupational Health and Safety
  - We believe that everyone is responsible for Occupational Health and Safety.

As soon as we have all the relevant information and	supporting documentation, we will process the application and			
seek approval from the IPLOCA Board of Directors.				
Based on this application and the attachments here	to, we hereby agree to abide by the IPLOCA By-Laws and request			
that our name is put before the members of the Boa	ard for approval as an Associate Member of the Association.			
Name:	Title:			
Date:	Signature:			