



# The Landscape Contractors' Association of NSW & ACT Ltd

ACN 002 644 920 ABN 37 116 532 957

8 French Avenue BANKSTOWN NSW 2200

P O Box 1226 BANKSTOWN NSW 1885

9790 5151 9796 2726

lca@lcansw.com.au

## APPLICATION FOR MEMBERSHIP

Please ✓ membership type applied for

- Full Member
- Affiliate Trade/Service Member
- Affiliate Supplier Member

**Application Fee** Please Read Notes below

Fees  
**\$150.00**

Please ✓ membership category applied for

- CATEGORY A – 2010 Annual Fee**  
15+ Employees
- CATEGORY B – 2010 Annual Fee**  
6-14 Employees
- CATEGORY C – 2010 Annual Fee**  
Up to 5 Employees

**\$1185.00**

**\$795.00**

**\$595.00**

### Notes:



- The LCA Financial year is from 1 January to 31 December.
- Fees quoted are GST inclusive and subject to annual review.
- Membership fees will be pro-rata from the date approval is granted and the amount payable will be invoiced with a letter of approval, if granted.
- Application Fee (non-refundable) payable by any method shown below, must accompany this application. Incomplete details may delay processing of this application.
- Completed application should be mailed to the P O address shown above.

### METHOD OF PAYMENT

(This Document will become a Tax Invoice on receipt of Payment)

LCA ABN 37 116 532 957

Please ✓ as appropriate

**DIRECT CREDIT** in favour of "LCA of NSW" for \$150.00 to **NAB Account No 506 193 735 BSB 082 124**

Deposited on (date) \_\_\_ / \_\_\_ / 2010

OR

Please charge \$150.00 Application Fee to my:  Mastercard  Visa

Card Number: \_\_\_ \_\_\_ \_\_\_ / \_\_\_ \_\_\_ \_\_\_ / \_\_\_ \_\_\_ \_\_\_ / \_\_\_ \_\_\_ \_\_\_ Expiry: \_\_\_ / \_\_\_

Cardholder's Name: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

Please PRINT

Company Name: \_\_\_\_\_  
(Insert full registered name)


Trading As: \_\_\_\_\_


Street Address (No.) (Street) (Suburb) (State) (Postcode)


Postal Address (Suburb) (State) (Postcode)

Business  \_\_\_\_\_

After Hours  \_\_\_\_\_

Mobile  \_\_\_\_\_



Fax  \_\_\_\_\_

eMail  \_\_\_\_\_

Website www. \_\_\_\_\_

*I/we hereby make application for Membership of The Landscape Contractors' Association of NSW & ACT Ltd (hereinafter LCA of NSW) and, if accepted, agree to be bound by the Constitution, Rules and By-Laws made thereafter and to adhere to the Code of Ethics and ensure that appropriate insurances are maintained. It is understood that the company/business information supplied may be distributed with discretion, for publicity purposes. In making this application it is noted that the LCA of NSW & ACT's authorised representative/s may make any relevant enquiries which will assist in its deliberation and consideration of said application.*

1. Details of Directors/Partners/Principal (Please indicate below, with \*\* the Company's main contact person)  
Please ensure accuracy when giving private address & telephone numbers. Please attach list if necessary.

Names		Address		
<b>A</b> Surname				
Given		PostCode		
<b>B</b> Surname				
Given		PostCode		
<b>C</b> Surname				
Given		PostCode		

2. a) Business name Registration No: \_\_\_\_\_ b) Licence No: \_\_\_\_\_  
(Attach copy Certificate of Incorporation) (Structural Landscape Licence/ Other)

c) ACN: \_\_\_\_\_ d) ABN: \_\_\_\_\_

e) Is your Business: Please ✓ as appropriate

Sole Trader  Partnership  Incorporated/Proprietary Company  Family Trust  Other \_\_\_\_\_

**TRADING RECORD/REFERENCES:**


3. a) No. of years in business (as corporation or sole trader): \_\_\_\_\_ years

b) No. of year's involvement in Landscape Industry: \_\_\_\_\_ years

4. Name/s of any associated businesses: \_\_\_\_\_

5. If Affiliate Trade/Services Applicant, list services provided (If not, go to question 6) \_\_\_\_\_

6. Staff:  (Total No.) Managers  Sales  Admin  Other  \_\_\_\_\_  
Specify

7. a) Financial: \_\_\_\_\_  
 Institution Name (eg W/pac, St Geo etc), Address & 


b) Applicant Company's approximate \$ turnover per annum: Please ✓ as appropriate

- < \$750,000
- \$750,000 - \$1.5 million
- > \$1.5 million

8. The following two Full (financial) Members have been contacted and agreed to support this Application.  
 (Call 9790 5151 to obtain a list of Full Members)







**PROPOSER:** \_\_\_\_\_ 

Company: \_\_\_\_\_

**SECONDER:** \_\_\_\_\_ 

Company: \_\_\_\_\_

9. Credit References

Company Details of Referee	Account Details	Telephone/Fax	Email
<b>A</b> Company:  Contact:  Position held:	Years held:  Monthly Expenditure: \$  Payment Terms:	  	<input checked="" type="checkbox"/>  <input checked="" type="checkbox"/>
<b>B</b> Company:  Contact:  Position held:	Years held:  Monthly Expenditure: \$  Payment Terms:	  	<input checked="" type="checkbox"/>  <input checked="" type="checkbox"/>
<b>C</b> Company:  Contact:  Position held:	Years held:  Monthly Expenditure: \$  Payment Terms:	  	<input checked="" type="checkbox"/>  <input checked="" type="checkbox"/>

**WORK SPECIALITIES, LOCATIONS AND QUALIFICATIONS**

10. Types of works undertaken: Please ✓ as appropriate

- (A) Residential
- (B) Commercial
- (C) Industrial
- (D) Maintenance
- (E) Hire of Equipment
- (F) Sale of Wholesale Supplies
- (G) Design Facility
- (H) Irrigation Systems Installed
- (I) Consultant Services
- (J) Multi-Housing
- (K) Pool Surrounds
- (L) Interiorscapes
- (M) Recreational
- (N) Environmental/Rehabilitation
- (O) Broad Acres
- (P) Water/Pond Features
- (Q) Indoor Plant Hire

11. Indicate any work specialties (if not listed above): \_\_\_\_\_

12. Referral Areas: Please ✓ as appropriate

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> (10) Sydney City, All Suburbs<br>or | <input type="checkbox"/> (20) NSW Country (All areas) or            | <input type="checkbox"/> (26) NSW Regional |
| <input type="checkbox"/> (11) Northern Suburbs               | <input type="checkbox"/> (21) Blue Mountains                        | <input type="checkbox"/> (30) ACT          |
| <input type="checkbox"/> (12) Southern Suburbs               | <input type="checkbox"/> (22) Central Coast                         |  |
| <input type="checkbox"/> (13) Eastern Suburbs                | <input type="checkbox"/> (23) Newcastle/Hunter Region               |  |
| <input type="checkbox"/> (14) Western Suburbs                | <input type="checkbox"/> (24) Mid and Far North Coast               |  |
|  | <input type="checkbox"/> (25) Wollongong, South and Far South Coast |  |

13. Details of Directors/Partners/Principal Qualifications. Please attach list if necessary.

Names		Technical	Tertiary	Other
<b>A</b>	Surname  Given			
<b>B</b>	Surname  Given			
<b>C</b>	Surname  Given			

14. **INSURANCE (Full Insurance is Mandatory)**  **Please attach Certificates of Currency**

Type of Insurance	Provider	Policy Number
<input type="checkbox"/> Home Warranty		
<input type="checkbox"/> Public Liability		
<input type="checkbox"/> Workers' Compensation		
<input type="checkbox"/> Other		
<input type="checkbox"/> Other		
<input type="checkbox"/> Other		

**CONTRACTS**

Under the "Home Warranty Act" a written contract is required by law for all projects with a labour component in excess of \$1000. All LCA of NSW & ACT Members are required to comply with this legislation and have exclusive access to the LCA developed "Landscape Works Agreement". The Agreements come in booklet form and are available for purchase through the LCA.

15. What do you hope to achieve/contribute if Membership is granted?

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**16. COMPLETED PROJECTS FOR SITE INSPECTION**

- ➔ Supply photographs of at least three (3) of the projects listed below. Photos should clearly delineate and identify the items in this **Scope of Works**. Progress photos are appropriate.
- ➔ Clearly label photos with project number and your company name.
- ➔ Complete the attached Annexure with embellished description of works (2 lines maximum).
- ➔ The LCA of NSW & ACT reserves the right to contact your clients during the Membership Application process to determine professional practice and to conduct inspections prior to annual Membership renewal.

<b>Project 1:</b> Value: \$ _____ <input type="checkbox"/> Residential <input type="checkbox"/> Commercial		Location: _____ Photos attached <input type="checkbox"/>	
Contact: _____	 : _____	Designer: _____	 : _____
<b>Project 2:</b> Value: \$ _____ <input type="checkbox"/> Residential <input type="checkbox"/> Commercial		Location: _____ Photos attached <input type="checkbox"/>	
Contact: _____	 : _____	Designer: _____	 : _____
<b>Project 3:</b> Value: \$ _____ <input type="checkbox"/> Residential <input type="checkbox"/> Commercial		Location: _____ Photos attached <input type="checkbox"/>	
Contact: _____	 : _____	Designer: _____	 : _____
<b>Project 4:</b> Value: \$ _____ <input type="checkbox"/> Residential <input type="checkbox"/> Commercial		Location: _____ Photos attached <input type="checkbox"/>	
Contact: _____	 : _____	Designer: _____	 : _____
<b>Project 5:</b> Value: \$ _____ <input type="checkbox"/> Residential <input type="checkbox"/> Commercial		Location: _____ Photos attached <input type="checkbox"/>	
Contact: _____	 : _____	Designer: _____	 : _____

**17. DECLARATION**

I/we hereby declare that signature/s affixed hereto attest that the information supplied and/or attached, is true and correct.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ (eg 12th) (month) (year)

Signature of Applicant/s: \_\_\_\_\_

Signatory's Name/s: \_\_\_\_\_  
 Please PRINT

The Landscape Contractors' Association of NSW & ACT Ltd



APPLICATION FOR MEMBERSHIP

Annexure to Question 16

16. What scope of works were conducted on the projects where photos were included?

PROJECT NO: .....

NAME OF PROJECT: .....

Circle "Yes" or "No"

If yes, write an embellished description of works. Attached photos should clearly delineate and identify items identified below in this Scope of Works.

Yes/No Paving .....

.....

Yes/No Retaining Wall/s .....

.....

Yes/No Fencing .....

.....

Yes/No Water Feature .....

.....

Yes/No Planting (Mulching, Turf etc) .....

.....

Yes/No Excavation.....

.....

Yes/No Concreting.....

.....

Yes/No Pool (surrounds).....

.....

Yes/No Irrigation .....

.....

Yes/No Lighting.....

.....

Yes/No Timber work (decks pergolas) .....

.....

Yes/No Other .....

.....

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Yes/No Excavation.....

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Yes/No Lighting.....

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Yes/No Other .....