



NATIONAL CONTRACT CLEANERS' ASSOCIATION
APPLICATION FOR MEMBERSHIP 2024/2025

***CATEGORY – ASSOCIATE MEMBER ***

(A Supplier Company or Individual not being eligible for admission as a Contract Cleaning Member, but by nature of products and/or services supplied to the Contract Cleaning Industry, is in the opinion of the Branch Membership Committee eligible for membership)

I/We the undersigned, do hereby make application for membership of the National Contract Cleaners Association.

IMPORTANT NOTES:

Please Note: The Gauteng Branch of the NCCA is registered for VAT

Branch Membership:

- Gauteng - Includes application for the following regions. Northwest, Mpumalanga, Free State and Northern Cape Province.
- Border-Kei – As this region forms part of the Eastern Cape Branch effective 1 April 2024, all membership applications must be directed to the Eastern Cape Branch Secretary - ecbranch@ncca.co.za

NCCA KZN Branch Membership

As KZN Branch falls under the KZN Bargaining council, the rules and fee structure of the Council are applicable to membership in this region.

Criteria: Applications for membership requires in addition, a certificate of registration or compliance from the KZN Bargaining Council for the Contract Cleaning Industry.

Membership applications must be directed to the KZN branch secretary - nccakzn@telkomsa.net

National Membership:

National membership is optional, and allows for automatic membership with all NCCA Branches at a discounted fee. This excludes NCCA KZN branch.

Criteria: Supplier/Associate Company to have a footprint nationally.

Membership application and enquiries, to be directed to the National Secretary – national@ncca.co.za

Please tick below applicable box for membership:

National	Gauteng	Limpopo	Eastern Cape	West Cape	KwaZulu Natal
<input type="checkbox"/>					

1. DETAILS OF APPLICANT

Registered name of member.....

Trading name

Indicate Sole proprietor, Partnership, Ltd or Pty Ltd Company, or CC.....

Physical address.....

.....

Postal address..... Code.....

Email address..... Website address.....

Telephone No (code.....) Cell No.....

2. CONTACT DETAILS

Primary contact person -Representative to who all correspondence should be directed.

Name.....Cell No.....

Email address.....

Plases list any additional contacts to be included for communication /admin purposes.

<u>Name</u>	<u>Designation</u>	<u>Email</u>	<u>Contact No/Cell</u>

3. SCOPE OF WORK

Please indicate below your current service offering to the cleaning industry-

- | | | | |
|-------------------------------|--------------------------|-----------------------------------|--------------------------|
| Cleaning chemicals | <input type="checkbox"/> | Protective clothing and equipment | <input type="checkbox"/> |
| Cleaning equipment | <input type="checkbox"/> | Rental services | <input type="checkbox"/> |
| Industrial Cleaning machinery | <input type="checkbox"/> | Training - Product / Service | <input type="checkbox"/> |
| Cleaning service workwear | <input type="checkbox"/> | Please specify..... | |
- Other services (not listed) applicable to the Industry.....

4. COMPANY REGISTRATION

Date of establishment of Business.....

Date, if any, of acquisition of business by present owner.....

Full names of Proprietor, Partners, Directors, Members

.....

Please provide the following information-

a) Company Registration Number

 (Please include a copy of Co. Registration document with this application)

b) VAT Number (if applicable)

c) Skills Development Levy No
Note: Where an employers' total salaries exceed R500 000 or expects that the total salaries will exceed the threshold over the following 12 months, that employer becomes liable to register for and pay SDL- (SARS)

Which SETA are you registered with?

5. INSURANCE

5.1 Compensation for Occupational Injuries and Diseases Act (COID) –

State your registration number for this fund.....

5.2 State the name of the Insurance Company with whom you have Public Liability Cover

.....

What is the amount of cover you hold? R.....

6. TRADE REFERENCES

Please provide contact details for two trade references: (Company Name, Contact, Tel No.)

1)

2)

3)

7. BRANCHES/SUBSIDIARY COMPANIES

Do you have any Branches..... / or Subsidiary Company/s (YES/NO)

***NOTE:** A branch being a separate physical office which is part of a larger company and a subsidiary being a separate company whose shares are owned by a larger 'parent' company '*

If YES, please indicate region below and provide name and address of branch under which branch/subsidiary is trading.

Gauteng

Limpopo

Eastern Cape

West Cape

KwaZulu Natal

BRANCH CONTACT DETAILS

<u>Name of Branch/Subsidiary</u>	<u>Contact Name</u>	<u>Email</u>	<u>Contact No/Cell</u>

8. CODE OF ETHICS

A member will unconditionally:

- Provide appropriate services to meet customer needs, at prices economic to both parties.
- Employ competent staff and make them effective through training and the provision of suitable equipment and materials.
- Respect competitors within the spirit of free enterprise.
- Promote the industry through professionalism at all levels.
- Comply with the statutes and the association's constitution and be open to audit in order to ensure compliance.

9. DECLARATION BY APPLICANT -

I/We, declare that I am authorised to complete this application on behalf of the applicant, and if accepted, will be responsible for the payment of fees as set out on page 5.

The information supplied herein is true and correct to the best of my knowledge. I hereby agree that the information supplied herein may be captured in terms of the Labour Relations Act and POPI Act.

I further **AGREE** that the information provided may be shared whether by email or on the internet or by any other means with the exception of any cleaner numbers declared.

With respect to the disclosing party's confidential information, the receiving party agrees it shall use the same degree of care in safeguarding the confidential information as it uses for its own confidential or like information, but in no event less than reasonable care.

I/We, agree that in the event of membership being approved, to uphold and abide by the Constitution, the Code of Ethics, all Legislation applicable to the industry, any Rules and decisions of the Association as may be determined from time to time, and the payment of fees when due.

SIGNATURE.....DATE.....

NAME.....DESIGNATION.....

Please note; The NCCA reserves the right to accept or reject any membership application

FOR OFFICE USE ONLY

BRANCH MEMBERSHIP COMMITTEE

APPROVAL DECLINED

CHAIRPERSON..... BRANCH/NATIONAL.....

SIGNATURE.....DATE.....

SCHEDULE OF ANNUAL FEES APPLICABLE
FOR THE FINANCIAL YEAR 1st APRIL 2024 TO 31st MARCH 2025

<u>FEES</u> <u>NON-REFUNDABLE</u>	<u>GAUTENG</u>	<u>LIMPOPO</u>	<u>EASTERN</u> <u>CAPE INCL</u> <u>BORDER-</u> <u>KEI</u>	<u>WESTERN</u> <u>CAPE</u>	<u>KWAZULU</u> <u>- NATAL</u>
<u>ADMINISTRATION FEE</u>	N/A				R400
<u>ENTRANCE FEE (Once off)</u>					R600
<u>BRANCH MEMBERSHIP</u>					
<u>ANNUAL SUBSCRIPTION</u> <u>FEE</u>	R2 500 (excl. VAT)	R2 500	R2 500	R2 500	R1 800
<u>NATONAL MEMBERSHIP</u>					
<u>ANNUAL SUBSCRIPTION</u> <u>FEE</u>	R6 000 (excl. VAT)				N/A

NOTES:

1. Annual Subscription

Companies joining in any month after the beginning of the financial year will be invoiced in full for the annual subscription fees.

2. Payment of fees

All fees will only be due after your renewal application has been approved whereupon an invoice will then be raised.

3. Membership application

Please email your Branch Membership application form to the Secretary at the applicable Branch Office as listed below or contact the National secretary at national@ncca.co.za for national membership applications or queries.

Branch Offices

Gauteng

Membership administrator
 Tel: 0861 105 881
gautengbranch@ncca.co.za
 The Secretary
gauteng@ncca.co.za

Limpopo

The Secretary
 Tel: 0861 105 881
limpopo@ncca.co.za

Eastern Cape

The Secretary
 Tel: 041 484 3773
ecbranch@ncca.co.za

KwaZulu Natal

The Secretary
 Tel: 031 312 2630
nccakzn@telkomsa.net

Western Cape

The Secretary
 Tel: 0861 105 881
natasha@nccawc.co.za
national@ncca.co.za