



SUPPLIER APPLICATION

Please complete form entirely and forward along with payment to:
CANADIAN URETHANE FOAM CONTRACTORS ASSOCIATION INC.
P.O. Box 3214, Winnipeg, MB R3C 4E7

phone: (204) 956-5888
OR 1-866-GO SPRAY
(1-866-467-7729)
Toll Free Fax:
1-877-416-3626

DEFINITIONS:

“**Licensed Supplier**” means a corporation who purchases spray polyurethane foam systems material (also known in the spray polyurethane foam industry as “A” component, Isocyanate, and “B” component, Resin,) from a CUFCA Licensed Manufacturer for distribution and sale to Licensed Contractors, and who has entered into a licensing agreement with CUFCA with respect to the use of the Certification Mark.

“**Approved System**” means a spray applied rigid polyurethane cellular plastic thermal insulation system which meets the CAN/ULC S705.01 National Standard (which includes any amendments thereto or any National Standard that replaces or succeeds this standard), there being supporting documentation (including without limitation any CCMC evaluation report and a copy of all test reports that support the evaluation) which shall be provided to CUFCA on demand to prove compliance with this standard. The Supplier Licensee shall also, throughout the Term, provide supporting documentation as required by CUFCA pursuant to its then current QAP, to confirm that the system meets applicable CUFCA requirements.

“**Evaluated System**” means a spray applied rigid polyurethane cellular plastic thermal insulation system which meets the CAN/ULC S705.1 national standard (which includes any amendments thereto or any national standard that replaces or succeeds this standard), and which has also been evaluated by CCMC and issued a CCMC evaluation number.

THIS FORM MUST BE COMPLETED FULLY OR THE APPLICATION WILL NOT BE PROCESSED

PART 1 - MEMBERSHIP

PART 1a – COMPANY INFORMATION

(Please print or type)

Representative (Primary Contact)		
Company Legal Name		
Company Trade Name		
Mailing Address		
Courier Address		
City	Province	Postal Code
Telephone	Fax (must be different from telephone)	E-Mail

PART 1a – COMPANY INFORMATION con't

Website		
Additional Branch Locations:		
Name and Addresses of all Principals and Directors: (if more than 3, please attach list to back)		
Name	Name	Name
Address	Address	Address
Type of Polyurethane Foam:		
<input type="checkbox"/> Medium Density Brand name: _____ Color: _____ Approx. annual sales in kgs. _____ <input type="checkbox"/> Open Cell Brand name: _____ Color: _____ Approx. annual sales in kgs. _____ <input type="checkbox"/> General Purpose Brand name: _____ Color: _____ Approx. annual sales in kgs. _____		
Type of Company:		
<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Private <input type="checkbox"/> Public <input type="checkbox"/> Retailer		

PART 1c – MEMBERSHIP POLICY

Supplier members' contribution to the CUFCA Industry Development Fund (IDF) is **\$0.005** per kg of all sales of resin which conforms to CAN/ULC S705.1. This is billed quarterly.

PART 1d – MEMBERSHIP AGREEMENT

As a supplier member of CUFCA I agree to abide by CUFCA's code of ethics, to:

1. To hold sacred the concept of free enterprise and unselfish service to the customer.
2. To build industry recognition and strength.
3. To support the research and development of new materials and installations to find new and innovative uses of polyurethane products and services.
4. To advocate an advertising policy which:
 - promotes the strengths and merits of the company's businesses and products
 - advertises only bona fide prices and products
 - does not reflect negatively on competitors' products and services
 - furthers the goals of the whole industry
5. To comply with federal, provincial and municipal laws and regulations to ensure the safe use of the product and to ensure health and safety standards are not violated.
6. To provide the highest quality of materials and honour any claims on the material.
7. To promote the use of polyurethane foam in a sustainable manner.
8. To foster industry cooperation and development.
9. To sell medium density material only to CUFCA Licensed Contractors.
10. To protect the environment and act in an environmentally responsible manner.

I agree to submit my quarterly sales of all medium density polyurethane foam resin that meets the CAN/ULC-S705.1 material standard to the CUFCA office by the 15th of the month following the end of the

quarter (Jan 15, April 15, July 15 and October 15). The IDF is billed on a quarterly basis. All fees are subject to change.

I hereby agree to abide by the code of ethics and to pay all invoices issued by CUFCA as outlined above. I recognize that the fees may change from time to time.

I hereby authorize the CUFCA office to make public business and non-personal contact information for the purpose of general association management and marketing.

I hereby certify that to the best of my knowledge, the foregoing statements are true and correct, and they have been made to facilitate an agreement with CUFCA.

I hereby authorize CUFCA to contact and obtain credit and other information as necessary from the references listed on this application, as well as to conduct any other personal or company investigation necessary for the purpose of qualifying as a CUFCA licensed supplier.

As a supplier member I agree also to pay all required fees, including a yearly membership fee, a supplier licensing fee and the CUFCA **industry development fund (IDF)**. The CUFCA IDF is limited to medium density sprayed rigid polyurethane foam that meets the CAN/ULC-S705.1 material standard. The IDF is billed on a quarterly basis. All fees are subject to change.

I hereby agree to abide by these codes of ethics.

_____ Date _____ Authorized Signing Officer

I am also interested in being involved in the following CUFCA Committees:

- Marketing Technical

PART 1e – MEMBERSHIP FEE POLICY

The full membership fee is charged at once, at all times and is non-refundable. Fees are subject to change without notice.

PART 1f – SUPPLIER MEMBERSHIP FEE

Fees are annual and run from July 1– June 30:

Fee: \$3500.00 + GST/HST (where applicable)

Fee: \$200.00 plus GST/HST Bi-Annual “Foam Days” Contribution (please inquire)

Method of Payment:

- My cheque of \$3500.00 + GST/HST (where applicable), made out to CANADIAN URETHANE FOAM CONTRACTORS ASSOCIATION (or CUFCA) is enclosed
- Charge \$3500.00 + GST/HST to my VISA or MasterCard:

Card Number

Expiry Date

_____ Authorized Signature

_____ Cardholder’s Name

CUFCA GST No R122768419

**END OF PART 1 – MEMBERSHIP
SUPPLIER, CONTINUE TO PART 2 – LICENSING**

PART 2 - LICENSING

PART 2a – COMPANY INFORMATION

Please list other business interests (Other Legal Companies or Trade Names)

List your Main Suppliers (Minimum 3. Include address and telephone number)

Name	Name	Name
Address	Address	Address
Phone	Phone	Phone

Financial Information

Name of Financial Institution (Primary)	
Branch Address	
Contact	Position
Telephone	Fax
Name of Accounting Firm (if applicable)	
Address	
Contact	Position
Telephone	Fax

Legal Information

Name of Legal Firm (if applicable)	
Address	
Contact	Position
Telephone	Fax

Insurance Information

Name of Insurance Company	
Address	
Contact	Position
Telephone	Fax

Amount of Comprehensive General Liability Insurance: _____

