



REGISTRATION APPLICATION FORM

APPLICANT DETAILS

Company Name: _____

Registered Address: _____

Telephone: _____

Email: _____

Person Responsible for
H&S Management: _____

How did you find out about
Safe-T-Cert? _____

COMPANY DETAILS

Legal Status: _____
E.g. Limited Company, Plc Company, Sole Trader. Please give details.

Date of Formation: _____

Company Number (If Applicable): _____
(From the Registrar of Companies)

VAT Registration No.: _____

TURNOVER

Please tick appropriate box

Size	Turnover €	Application Fee €	VAT@23% €	TOTAL €
<input type="checkbox"/> Small (A)	0–1,270,000	87.65	20.16	107.81
<input type="checkbox"/> Small (B)	1,270,000–6,350,000	146.09	33.60	179.69
<input type="checkbox"/> Medium	6,350,000–19,050,000	298.01	68.54	366.55
<input type="checkbox"/> Large	19,050,000–38,100,000	444.09	102.14	546.23
<input type="checkbox"/> Very Large	38,100,100+	596.01	137.08	733.09

OVER



REGISTRATION APPLICATION FORM

PAYMENT METHOD

Please indicate your method of payment by ticking the relevant box

BACS

BACS Payment of €

IBAN:

SWIFT/BIC:

Bank Name:

Branch Address:

has been transferred to:

IE30AIBK93101207253539

AIBKIE2D

AIB

1 – 4 Lower Baggot Street

Cheque

I enclose my cheque for €

made payable to **Safe-T-Cert**

DECLARATION

On behalf of the above company, I confirm that the above information is correct, and I request that the company be registered with the Safe-T-Cert Scheme. I agree to comply with the Rules of the Scheme.

NAME (Print): _____
(Principal or Director)

SIGNED: _____

DATE: _____

Do you wish to be contacted by the CIF regarding potential membership of the CIF? Yes No

Please return your application, along with your most recent Verification of Turnover to:

Safe-T-Cert
Construction House
Canal Road
Dublin,
D06 C6T2