

Approved Contractors Register Application

This application form is for the Queensland Arboricultural Association (QAA) ABN: 25 184 006 967 to appear on the Approved Contractors Register. All approved contractors are listed under the business/company name.

Company Name:			
Contact Name:			
Address:			
Phone Number:		Email address:	

Checklist:

All the below documentation **must** be provided to the QAA for review:

	Compliance						
<p>Minimum of 3 people per team with at least 2 who hold an AQF Certificate III in Arboriculture Qualification. All qualifications (including subject list) are to be supplied for listed employees named below prior to approval/renewal. Listed employees must be employed by the company.</p> <table border="1"> <tr> <td>1.</td> <td></td> </tr> <tr> <td>2.</td> <td></td> </tr> <tr> <td>3.</td> <td></td> </tr> </table>	1.		2.		3.		<input type="checkbox"/>
1.							
2.							
3.							
<p>Demonstrated evidence of on-going training, with proof of attendance, at 3 events per year. This can include:</p> <ul style="list-style-type: none"> ○ QAA events and workshops ○ Climbing competitions (this can include volunteering as a judge) ○ QTRA, TRAQ, or VALID ○ ISA events or certifications ○ In-house training ○ Online courses/training 	<input type="checkbox"/>						
<p>Aerial Rescue must be completed a minimum of once per year. This can include Tree Climbing Comp, Workshop or in-house training (must include proof – <i>Provide date, method of training, and proof of attendance.</i>).</p>	<input type="checkbox"/>						
<p>EWP Operators Ticket Referenced (<i>where applicable</i>)</p>	<input type="checkbox"/>						
<p>Course in General Safety Induction (<i>Blue or White Card</i>)</p>	<input type="checkbox"/>						
<p>First Aid Certificate (<i>Apply First Aid minimum</i>)</p>	<input type="checkbox"/>						
<p>All relevant Insurances (<i>Public Liability, Workers Comp, any other relevant Business Insurance CoC</i>)</p>	<input type="checkbox"/>						
<p>Workplace Health & Safety Policy (<i>Most recent version</i>)</p>	<input type="checkbox"/>						
<p>Environmental Management Policy (<i>Most recent version</i>)</p>	<input type="checkbox"/>						

<p>Completed Statutory Declaration stating all Employee Benefits are paid and up to date. Refer to this link for a blank form if you do not have one already Qld Statutory Declaration - Oaths Act 1867 (rti.qld.gov.au)</p>	<input type="checkbox"/>
<p>A short capability statement about the company outlining experience and services (500 words - <i>Think of this as your intro for the public listing</i>)</p>	
<p>List of suburbs/locations you travel within (This helps clients know your coverage zone)</p>	
<p>Tick this box to confirm all compliance documents have been finalised, ready to send to the QAA.</p>	<input type="checkbox"/>
<p>Additional Comments</p>	<p>Date:</p>

Declaration & Payment

By signing the below, the applicant confirms that they wish to join the Approved Contractors Register of the Queensland Arboricultural Association and if accepted:

- Will pay the relevant annual charge below. **Note:** Membership is included in the price of the Register and runs from 1st July – 30 June.
 - Contractor (1 – 5 employees) – \$1,000 per year
 - Contractor (6 – 10 employees) – \$1,400 per year
 - Contractor (10+ employees) – Price on application

- Will observe the Association's [Code of Conduct](#)

- Acknowledges that the use of the Association's name or logo in advertising or on personal or company stationary is only permissible whilst membership subscription dues remain current.

Applicant Full Name:		Signature:
Payment Preference:	Credit Card: Please pay through our members portal <input type="checkbox"/>	Direct Deposit: BSB: 124 054 <input type="checkbox"/> Acct: 2260 1860
		PayPal payable to: office@qaa.net.au <input type="checkbox"/>

Thank you for supporting the Queensland Arboricultural Association