



SAWDAC (The Siding and Window Dealers Association of Canada)

AND RENOVATION CANADA

MEMBERSHIP AND RENOPLAN APPLICATION
(Dealer/Renovation Canada - Complete Entire Application)
(Associate – Complete Sections A,B,D,G)

84 Adam Street
Cambridge, ON,
Tel: (519) 651-2812 Fax: (519)658-4753
Email: info@sawdac.com

My Company is applying for: Dealer Membership Associate Membership Renovation Canada

A. COMPANY INFORMATION

Company Name:		Date:	
Address:		City:	Province:
Postal Code:	Phone Number	Fax Number:	
Email:	Web Page	GST Number:	
In Business Since (mm/yy)	Type of Business	Fiscal Year End	Gross Annual Sales
Owner Acting in Business Yes No	Liability Insurance Coverage Amount: (statement of liability insurance attached)		

B. OWNER INFORMATION

Sole Proprietor Partnership Corporation

Partner 1 Name	Date of Birth	SIN
Present Address	City, Province, Postal Code	
Phone:	Previous Address (if less than a year)	
Drivers License	Email Address	
Partner 2 Name	Date of Birth	SIN
Present Address	City, Province, Postal Code	
Phone:	Previous Address (if less than a year)	
Drivers License	Email Address	
Primary Contact Administration	Primary Contact Installation	

C. BANKING AND CREDIT INFORMATION (Attach Void Cheque)

Financial Institution Name and Address	Date Account Opened:	
Telephone Number: Fax Number:	Bank Account Number	
	Branch Number	Institution No
SOLICITOR		AUDITOR
Name:		Name:
Address:		Address:



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Continued on Next Page

D. REFERENCES (Usually an existing SAWDAC Member or Major Supplier)

Reference 1 Name	Company Name
Telephone	Fax
Reference 2 Name	Company Name
Telephone	Fax

E. SURVEY

What Percentage of your sales are									
Windows and Doors	%	Siding	%	Roofing	%	Decking	%		%
Other:	%		%		%		%		%

How Many do you employ in			
Sales	Administration	Installation	Other: Please Specify:

ESTIMATE THE FORECAST SALES OPPORTUNITIES FOR THE BANK'S FINANCING PROGRAM

	EST GROSS SALES	EST. TO BE FINANCED
1 st year		
2 nd year		
3 rd year		

F. WORKMANSHIP GUARANTEE STATEMENT

Every member of SAWDAC that installs products must provide their customers with a five year workmanship guarantee on renovation contracts, and a one year workmanship guarantee on new house contracts.

This Statement is written evidence that the SAWDAC member signing this document does provide the workmanship guarantees herein stipulated.

Signature: _____ **Witness:** _____

G. SAWDAC DEALER AGREEMENT

I agree that SAWDAC and/or its financial partner(s) can obtain credit information concerning my company and me personally from any credit bureau, any other reporting agency or person, my suppliers and the bank where my business and/or personal account(s) are carried. This authorization will remain in place as long as I am a SAWDAC member.

I understand that membership in SAWDAC is subject to acceptance by the Executive Board and that membership may be refused or revoked should the Executive Board find that the applicant has failed to provide or continue to provide evidence that the applicant meets SAWDAC's membership criteria and operates his/her business according to SAWDAC's code of ethics. WE agree that SAWDAC or Scotiabank may terminate our participation in RENOPLAN at any time should we fail to meet these obligations. SAWDAC may advise its members or the public of the names of dealers whose membership has been revoked. If accepted as a member of SAWDAC, I agree to abide by the Constitution, By-Laws and Regulations of the Association.

Signature _____ **Date:** _____

SAWDAC Representative _____ **Date:** _____