



Application for Membership

1. Legal Ownership of Business

(a) **Trading Name(s):**

(b) **Organisation Type:**

Limited Company

Partnership

Sole Trader

Limited Liability Partnership

Other, please specify.....

2. Trading Address:

.....
.....
..... Postcode:

Telephone No: Mobile No:.....

Fax No:

Email:

Web Address:

VAT Registered No:

Registered Company Name.....

Registered Office address (if different to trading address).....

.....

.....

Trading Hours.....

3. Nominated Person for Trading Standards Contact:

.....

Role within Business:.....

Telephone No:

Email:

Preferred written Communication: Email Postal

4. **Nominated Person for Complaints Procedure:**

 Role in Business:.....
 Telephone:
 Email:
 Preferred written Communication: Email Postal
5. **Nature of Business** (please tick all applicable boxes)
- New Vehicle Sales
 Used Vehicle Sales
 Repairs (including body work) and Servicing
 MOT Centre No.....
- How long has the business been trading? Years months
6. **Approximate number of staff:**
7. **Member of any Trade Associations?:(please specify)**

8. **Do you have a consumer credit license?** Yes/No
 If Yes, license number and expiry date:

Declaration

I/we wish to be considered for membership of the Motor Trade Partnership. I/we agree to a probationary period where the business and systems are vetted and monitored by the Council's Trading Standards division. Should I/we be accepted into the scheme, I/we agree to pay the membership fee to East Riding of Yorkshire Council.

Signature:

Name:

Position:

Date:

Please return application form to:

East Riding of Yorkshire Council Trading Standards
 Calibration Test Centre
 Brudenell Way
 Dane Park Road
 Hull
 HU6 9DX