

Appendix 3c Application Form - Service Providers

To apply to use the Antimicrobial Copper brand and Cu+ mark, this form should be completed after studying the Conditions of Use and talking to your local Copper Centre representative. Successful applicants will receive a Trademark License Agreement document for completion.

Company

Legal name of entity:

'Doing business as' or Trading Name:

Form of organisation:

Jurisdiction of organisation:

Type of business:

Parent Company/Group (if applicable):

Registered address:

Country:

Website:

Company Registration Number:

Please confirm you have a project traceability system allowing you to verify your material sources I confirm

Do you have a written Quality Management System? Yes No Details (eg ISO 9001, internal)

Do you have Public Liability Insurance? Yes No

Contact for Brand Management

Name:

Job Title:

Address (if different from above):

Telephone:

Email:

Contact for Admin (if different)

Name:

Job Title:

Address:

Email:

Contact to appear on website directory listing on www.antimicrobialcopper.org

Name:

Email:

Website link for directory listing (preferably link to your Antimicrobial Copper section):

Short description of services (up to 100 words)
On approval you will be contacted for more detailed information and images for your listing.

Markets

Markets (select those applicable)

- Medical and Healthcare
- Schools and Public Buildings
- Public Transport
- Food and Hospitality (dry food contact only)
- Sports Facilities
- Other (please specify)

Services

Services (select those applicable)

- Architectural Services
- Contract Management
- Site Survey
- Product Design
- Product Installation

- Product Customisation
- Microbiological Testing
- Metals Processing
- Other (please specify)

Locations

Please select all regions where products will be marketed/sold, noting that for marketing in US or Canada regulatory registration is a prerequisite.

- Africa and the Middle East
- Asia and the Pacific
- Canada
- Europe
- South America
- United States

Please confirm you will only procure materials and products manufactured in accordance with the Cu+ Conditions of Use

Yes

I confirm that I have read the Conditions of Use document.

I confirm the information provided is accurate and that I am authorised to sign this form.

Please return this form electronically and by post, to your local Copper Centre.

Signed:

Name:

Position:

Date:

Print to pdf to generate electronic copy.