

ONTARIO Approved Professionals Program

A Division of CDN Approved Professionals Program Inc. 224 King St.W. PO Box 575, Brockville, ON, K6V 5V7 Tel: 613-865-8999 membership@ONTApproved.ca www.ONTApproved.ca Corporate: dave@ONTApproved.ca

Expedited Renewal Application:

This is an Expedited Renewal Form with the Ontario Approved Professionals Inc. program by using this form, all undersigning individuals will be held accountable for false or incomplete information. Please ensure you read this form and confirm all details as applicable.

Your Renewal with the Ontario Approved Professionals Inc. program will be considered "pending" until the following criteria has been supplied in complete form and validation process has been completed.

Upon review of you	•	y membership services, it is the Primary all updates and changes as applicable.	
	•	nal Application and Information provided.	
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WE HAVE UPDA	ATES & CHANGES to Section 1a from	the Original Application, as follows;	
Business Category / Business Type	1		
Type of services offered by company:			
Company Name:			
Registered Owner:		Title:	
Company Email:			
Company Website:			
Company Phone:	Office: Other:		
Company	Civic:	Civic: City:	
Mailing Address:	Prov.	ov. Postal:	
Was your Renewal via a Recruiter?	Yes or ONo If Yes, who was y	our Recruiter?	
Facebook Link/ID:			
Instagram Link/ID:			
LinkedIn Link/ID:			
Other Link/ID:			
enewal of Sectio	n 1b – Program & Division Selec	etion	
Membership	Provincial: Ontario *includes Four Activ	e Divisions of your choice	
	Divisional: Leeds & Grenville	O Divisional : Stormont, Dundas, Glengarry	
	Divisional : Kingston, South Frontenac	O Divisional: Ottawa, Orleans, Nepean	
	Divisional:	O Divisional:	
	Divisional:	O Divisional:	
	Divisional:	O Divisional:	

Renewal of Section 2 – Integrity & Public Accountability *Not Applicable for Renewal Applications

Renewal of Section 3 – Company Details & Specifics *Not Applicable for Renewal Applications

Renewal of Section 4 – Client References *Not Applicable for Renewal Applications

Renewal of Section 5 – Company/Professional References *Not Applicable for Renewal Applications

Renewal of Section 7 – Code of Conduct Agreement

As an Approved Member of the **Approved Professionals Program**, I/We have read the following **Code of Conduct.** I/We agree to follow and adhere to the best of my/our abilities. This Code of Conduct for all members of the program shall apply while serving the public as a professional.

- Service the clients with courtesy & respect.
- Maintain a clean, safe workplace.
- Present yourself in a tidy, clean & professional manner.
- Provide written quotes/estimates that are honest, accurate and accountable.
- Communicate project status with client on regular basis and upon modification.
- Complete work to an acceptable professional industry standard.
- Ensure all employees are trained to complete tasks assigned and to ensure a safe working environment.
- Maintain proper insurance and comply with all relevant regulations.
- Comply with all municipal by-laws and regulations.
- Encourage use of the Approved Professionals Program & network.

Renewal of Section 8 – Revocation of Rights

I/We understand that failure to adhere to the **Code of Conduct** and/or **Program Guidelines** of the **Approved Professionals Program** will result in revocation / removal of membership.

I/We understand that if for any reason the applicant(s) Approved Professional certification is revoked or cancelled, the applicant(s) has 15 days to cease and desist on all usage of the Approved Professionals logos, affiliations, and services. Failure to do so will result in possible legal action.

Renewal of Section 9 – Sworn Declaration

I (Primary Applicant), solemnly declare that all the information and statements contained in this application are true and complete. I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

Renewal of Section 10 – Company Profile Information *Not Applicable for Renewal Applications Renewal of Section 11 – Consent to Email for Anti-Spam Compliance

As per the Canadian Anti-Spam Legislation, I give my consent to the Ontario Approved Professionals Program to communicate with me electronically. I understand that my consent may be withdrawn at any time by emailing the Ontario Approved Professionals Program.

- (i) The Undersigned is agreeing & confirming all details for Section 7, Section 8, Section 9 and Section 11.
- (ii) The Undersigned is also confirming that as per their original Application, all credentials & professionals requirements to conduct business are in good standing and active status.

X	<u>.</u>		
Signature – Primary Applicant		Date	

☐ Provincial Membership: \$700	\$ 791.00					
 i) Application for the Province of Ontario. ii) One (1) Year term agreement and per applicable program by-laws. iii) Membership shall include selection of Four (4) active divisions within the Ontario Program Mapping. iv) Membership Rate for One (1) Professional / Person. Additional Add-On Members not included (see below) 						
Please select your Primary / Home Division Divisional: Leeds & Grenville Divisional: Kingston, South Frontenac Divisional: Divisional: Divisional:	 Divisional: Stormont, Dundas, Glengarry Divisional: Ottawa, Orleans, Nepean Divisional: Divisional: Divisional: 					
☐ Divisional Membership: \$375		\$ 423.75				
 i) Application for One (1) Division within the Province of Ontario. ii) One (1) Year term agreement and per applicable program by-laws. iii) Membership shall be limited to the selection of One (1) active division within the Ontario Program Mapping. iv) Membership Rate for One (1) Professional / Person. Additional Add-On Members not included (see below) 						
Please select your Primary / Home Division	 Divisional: Stormont, Dundas, Glengarry Divisional: Ottawa, Orleans, Nepean Divisional: Divisional: Divisional: 					
Additional Divisional Member i) Each selected Additional Division will be ii) One (1) Year term agreement and per ap	charged at \$200.00+HST per Division.	\$				
Please select which Divisions you would lik						
☐ Add-On Member: \$ 56.50/Mem						
i) Each requested Add-On Member will be ii) One (1) Year term agreement and per ap	charged at \$50.00+HST per Person.	\$				
	charged at \$50.00+HST per Person. plicable program by-laws.	*Including Tax				
ii) One (1) Year term agreement and per ap	charged at \$50.00+HST per Person. plicable program by-laws. pership Level \$					
ii) One (1) Year term agreement and per ap Sub-total [A] Memb	charged at \$50.00+HST per Person. plicable program by-laws. pership Level \$ onal Divisions \$	*Including Tax				

FOR OFFICE USE ONLY

Renewal of Section 13 – Membership Application Review and Approval

Membership Approval Criteria:

- Application accurate, legible and substantially complete.
- Proof and copies of all professional licenses, insurances, certifications provided.
- Membership fees paid in full.
- Membership Director has reviewed and signed.
- President and/or Vice-President has reviewed and signed.

This Application as submitted by the primary applicant will be under review by our Membership Review Committee, a confidential review panel comprised of Executive Directors as per the program guidelines and by-laws.

The Membership Review process takes between 3-10 business days. Once the review is complete, the Membership Director will contact the primary applicant with the final decision.

Membership / Recruitment Recommendations:							
○ APPROVE	O NOT ABLE TO AP	PROVE OINCOM	IPLETE APPLICATION				
Supporting Comme	ents:						
Representative Nar	me:	Da	ted:				
President and/or Vice-	President Review & Deci	sion:					
O APPROVE	O NOT ABLE TO AP	PROVE OINCOM	IPLETE APPLICATION				
Notes / Comments	:						
Signed:	Dated:						
Membership Month:							
January	February	○ March	○ April				
○ May	O June	O July	O August				
○ Septemb	er October	○ November	O December				

UNDER REGULATION OF THE ONTARIO APPROVED PROFESSIONALS PROGRAM

A Division of CDN Approved Professionals Program Inc.



