

NGAEDA MEMBERSHIP APPLICATION

NATURAL GAS APPLIANCE AND EQUIPMENT DEALERS ASSOCIATION

This is a ___ new or ___ renewal application.

Company Name: _____

Address: _____

City/ Town: _____ Postal Code _____

Telephone: _____ Fax: _____

Contact person: _____

Email: _____

Please list the natural gas appliances and equipment that you sell.

Appliances	Brand name
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Do you have a natural gas appliance burning in you store or shop _____

Appliance	Brand name
_____	_____
_____	_____
_____	_____
_____	_____

Do you service the appliances/ equipment that you sell? _____

Are you bonded and licensed in accordance with the provincial regulations? _____

Do you provide your staff with the product knowledge to enable them to carry out their services in a highly professional manner? _____

Do you install only Canadian Gas Association, Canadian Standards Association, Underwriters Laboratories Canada, or Warnock Hersey approved equipment? _____

ANNUAL MEMBERSHIP FEE IS \$550.00

PLEASE MAKE CHEQUE PAYABLE TO: NGAEDA

MAIL TO:

**NGAEDA
620 4TH. AVE. N.W.
SWIFT CURRENT, SASK.
S9H 0V8**

NGAEDA FAX: (306) 773-3419

EMAIL: d.jerry@sasktel.net

NGAEDA APPROVAL: _____ DATE: _____

CHEQUE # _____