

FOR OFFICE USE ONLY

Membership No.

Start Date.

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# The Property Ombudsman Limited (TPO)

Company Registration Number: 3339975

## ADDITION TO MEMBERSHIP APPLICATION FORM

Membership Number 

Company Name:	Trading Name:
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### SECTION A - ADDITIONAL DISCIPLINE

Contact Name and Principal Office Address

Contact Name:	Tel No:		
Address:	Fax No:		
	Email:		
Post Code:	www.		
Company Reg No:	VAT Reg No:		
<b>MEMBERSHIP REQUIREMENTS</b> (Please tick appropriate box) See Guidance on Registering for Membership for price guide			
Residential Sales Office <input type="checkbox"/>	Lettings & Management Office <input type="checkbox"/>	Residential Leasehold Management <input type="checkbox"/>	Approved Scheme only <input type="checkbox"/>
International Office <input type="checkbox"/>	Commercial Office <input type="checkbox"/>	Chattels <input type="checkbox"/>	Admin/Satellite Office <input type="checkbox"/>

### SECTION B - ADDITIONAL BRANCHES

(Please give details of any additional branches using separate sheet if necessary)

Contact Name:	<b>MEMBERSHIP REQUIREMENTS</b> (Please tick appropriate box) See Guidance on Registering for Membership for price guide
Address:	<b>Full Membership to Include:</b>
	Residential Sales Office <input type="checkbox"/>
Post Code:	International Office <input type="checkbox"/>
	Lettings & Management Office <input type="checkbox"/>
Tel No:	Residential Leasehold Management <input type="checkbox"/>
Fax No:	Chattels <input type="checkbox"/>
Email:	Commercial Office <input type="checkbox"/>
www:	Admin/Satellite Office <input type="checkbox"/>
Company Reg No:	<b>Registration for Approved OFT Estate Agents Redress Scheme</b>
VAT Reg No:	Approved Scheme only <input type="checkbox"/>

Contact Name:	<b>MEMBERSHIP REQUIREMENTS</b> (Please tick appropriate box) See Guidance on Registering for Membership for price guide
Address:	<b>Full Membership to Include:</b>
	Residential Sales Office <input type="checkbox"/>
Post Code:	International Office <input type="checkbox"/>
	Lettings & Management Office <input type="checkbox"/>
Tel No:	Residential Leasehold Management <input type="checkbox"/>
Fax No:	Chattels <input type="checkbox"/>
Email:	Commercial Office <input type="checkbox"/>
www:	Admin/Satellite Office <input type="checkbox"/>
Company Reg No:	<b>Registration for Approved OFT Estate Agents Redress Scheme</b>
VAT Reg No:	Approved Scheme only <input type="checkbox"/>

## SECTION C – UNDERTAKINGS

The Applicant confirms that a copy of the Terms of Reference has been provided, read and understood and undertakes to TPO that the Applicant will:

1. submit to any investigations by the Ombudsman pursuant to and in accordance with the Terms of Reference (as amended from time to time).
2. be bound by and comply with all the provisions contained in the Terms of Reference.
3. (a) comply in full with any award which, is made and is enforceable against it in accordance with the Terms of Reference; and  
(b) pay the complainant the amount of any such award within the period for payment set out in the Terms of Reference.
4. maintain and operate an appropriate internal complaints procedure in the model of any professional body of which the Applicant is a member of or in the form set out in the Guidelines that accompany this Application Form.
5. comply with the relevant Codes of Practice (as amended from time to time) where Full Membership has been accepted.
6. inform the Property Ombudsman upon the opening of any new branch.
7. pay such subscriptions as are due from time to time as determined by the Board of TPO within 28 days of the date of invoice.
8. maintain Professional Indemnity Insurance and ensure that:
  - (a) it includes cover for awards made by the Ombudsman.
  - (b) the excess for such awards is no more than £1,000.
  - (c) the endorsement L1391 has been added to the policy (if appropriate) and
  - (d) such Insurance is renewed on an annual basis a copy provided to TPO.
9. in respect of Full Membership, give TPO not less than one month's notice of its intention to withdraw from Full Membership.

The Applicant further confirms that, to the best of its knowledge no Trading Standards Office, or any other regulatory body, is taking or contemplating taking, disciplinary action against the applicant or any employee(s) of the Applicant.

## SECTION D - ACKNOWLEDGEMENT

The Applicant acknowledges and agrees (on its own behalf and on behalf of all branches) that for all purposes (including for the purposes of the Contracts (Rights of Third Parties) Act 1999) this document and the Terms of Reference shall be enforceable against the Applicant:

- (i) by or on behalf of each relevant complainant in relation to and to the extent of any award; and/or
- (ii) by TPO or any member of TPO.

The Applicant acknowledges and agrees that, in the event of its ceasing to be a member of TPO as a result of any breach by the Applicant of the undertaking set out above (or otherwise), TPO may:

- (i) notify any professional body named by the Applicant at Section A and any relevant authority (including the Office of Fair Trading, any Trading Standards Officer or appropriate regulatory authorities) of the fact of cessation of the Applicant's membership; and
- (ii) publish the fact of cessation of the Applicant's membership and the circumstances surrounding it by such means as TPO considers appropriate.

## SECTION E – INDEMNITY

The Applicant shall indemnify TPO against all liabilities, costs, expenses and damages suffered by TPO arising out of or in connection with any breach by the Applicant or any branch of the Applicant of any of the terms and conditions contained in this Application Form or the Terms of Reference.

## SECTION F - CONFIRMATION AND SIGNATURE

**This form should be signed by a Director, Partner or Other person authorised on behalf of the Applicant in the presence of a witness.**

I/we confirm that:

- (i) having read the entirety of this Application Form and the Terms of Reference, the Applicant (and each of its branches and/or Associated Entities) applies to become a member of TPO on the terms and subject to the conditions set out therein.
- (ii) the Applicant (and each of its branches) will comply with the terms and conditions of membership as constituted by this Application Form and the Terms of Reference (each as may be amended, varied, replaced or supplemented from time to time in accordance with their terms).
- (iii) the Applicant (and each of its branches) acknowledges this Application Form is signed as a deed.

Applicant		Witness	
Full name:	Position in Firm:	Full name:	Address:
Signature:	Date:	Signature:	