



OARA MEMBERSHIP APPLICATION FORM

Provisional Member Application

FEE: \$150.00* + 13% HST = \$169.50

Any private sector sole proprietorship, partnership or corporation recognized by their local and provincial government as being a legitimate business PRIMARILY engaged in the business of dismantling motor vehicles for their parts re-use and recycling and for the vehicle's material recycling and re-use in the Province of Ontario, *that cannot meet the full membership criteria of a Direct member.*

Recyclers with Provisional Status shall: have access to those member benefits as approved by the Board of Directors in writing; have the right to attend and participate in Association activities. Their participation in Association business affairs shall be restricted to such matters as may directly concern them; and, have no right to vote or hold office.

Company: _____

Address: _____

City: _____ Municipality: _____ Postal Code: _____

Tel: _____ Fax: _____ Email: _____

Website: _____ Inventory System: _____

of Employees: _____ Years in Business: _____ # of vehicles bought/yr _____

Officers, Directors and/or Partners (list full names and positions):

My application has been sponsored by the following OARA Direct Member in good standing:

Provide photocopies of the following:

___ Class C Garage License from MTO ___ Motor Vehicle Dealers D License from OMVIC

(Applicant must be compliant with the Highway Traffic Act and Motor Vehicle Dealers Act by holding either or both of the above licenses.)

___ Municipal License

(This license must clearly show that your business is licensed in the municipality you operate in as an auto wrecking, auto salvage, auto recycling or equivalent designation. If your municipality does not require a license, you need to submit a letter from your municipality, on their letterhead, indicating that a license is not required but the business, identified as an auto salvage, auto wrecking, auto recycling or equivalent designation, is in compliance with local zoning and bylaws.)

___ Federal Business Tax Number ___ WSIB Number ___ Proof of Liability Insurance

___ Ontario Tire Stewardship Registration Number ___ Waste Generator Number, Ministry of Environment

___ Waybills/Invoices showing disposal of: used oil, antifreeze, washer fluid, batteries, fuel, mercury switches

Provide colour photographs showing the following:

___ Front of property ___ Sales counter ___ Parts storage and racking ___ Scrap vehicle storage

___ Delivery vehicles ___ Vehicle dismantling ___ Scrap tire storage ___ Battery storage

___ Waste storage ___ CFC/hCFC recovery machines

OARA reserves the right to undertake a facility tour or contact the sponsoring Direct Member during the application process to verify any submitted information.

Read and Initial the following Standard Agreements:

OARA Code of Ethics

As a condition of membership in the Ontario Automotive Recyclers Association, I agree:

- To respect the reputation, profile and status of the Ontario Automotive recyclers Association, and represent the association accordingly;
- To operate according to the ordinances, statutes and laws of the various jurisdictions;
- To promote the conservation of energy and the total utilization of our natural and manufactured resources;
- To minimize the reduction of usable automotive parts to scrap, as long as we believe there remains a reasonable potential of saving the energy it represents, by negating the need to manufacture a similar replacement part;
- To maintain a clean an non-polluting environment in and around our place(s) of business;
- To participate in the functions, activities, and programs of the Association, and where possible lend my/our business and professional expertise.

1. I have read and will abide by the OARA Code of Ethics. _____

2. I have read and will participate in the Switch Out mercury recovery program. _____

I understand that participation in the Switch Out Program is mandatory for Provisional Status.

For details and to sign up, go to the Switch Out website: www.switchout.ca.

3. I understand that I must attend three (3) consecutive OARA Member Meetings. _____

While no time limit exists for upgrading my Provisional Status to a Direct Member, it is expected that I will be working towards achieving Direct Member status by complying with the terms and conditions of the O-CAR Program, www.oara.com/ocar.php

4. I understand that terms and conditions on all payments to the Association are: Net 15 Days. _____

5. I understand that I am primarily joining OARA for the educational opportunities and that I will not have access to membership benefits related to vehicle acquisition programs, shipping or insurance discounts.

6. I understand that I will not be able to use the OARA logo nor be included in OARA marketing material until such time as I achieve Direct Member status.

I am aware that a complete application consists of a: two (2) page application form; cheque for \$150+hst; and, various supporting photocopies and photographs.

I hereby consent to the release of the above information and specifically authorize OARA to receive the above information for purposes of evaluation of this membership application.

Applications missing information or missing payment will not be considered until all information is submitted.

Name: _____

Signature: _____ Date: _____

**Make cheque payable in full to OARA. Submit ALL supporting documents to OARA:
1447 Upper Ottawa Street, Unit 1, Hamilton ON L8W 3J6 Fax: 905-383-1904 Email: admin@oara.com**