



## Application for Membership

### 1. Legal Ownership of Business

(a) Trading Name(s): .....

(b) Organisation Type:

Limited Company  Partnership

Sole Trader  Limited Liability Partnership

Other, please specify.....

### 2. Trading Address:

.....  
.....

..... Postcode: .....

Telephone No: ..... Mobile No:.....

Fax No: .....

Email: .....

Web Address: .....

VAT Registered No: .....

Registered Company Name.....

Registered Office address (if different to trading address).....

.....

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Trading Hours.....

### 3. Nominated Person for Trading Standards Contact: .....

.....

Role within Business:.....

Telephone No: .....

Email: .....

Preferred written Communication: Email  Postal

**4. Nominated Person for Complaints Procedure:** .....

Role in Business:.....

Telephone: .....

Email: .....

Preferred written Communication: Email  Postal

**5. Nature of Business** (please tick all applicable boxes)

- New Vehicle Sales
- Used Vehicle Sales
- Repairs (including body work) and Servicing
- MOT Centre No.....

How long has the business been trading? ..... Years months

**6. Approximate number of staff:** .....

**7. Member of any Trade Associations?:(please specify)** .....

**8. Do you have FCA Authorisation for Consumer credit** Yes/No

If Yes, please supply the reference number: .....

**Declaration**

**I/we wish to be considered for membership of the Motor Trade Partnership. I/we agree to a probationary period where the business and systems are vetted and monitored by the Council's Trading Standards Service. I/we enclose the membership fee to Hull City Council.**

Signature: .....

Name: .....

Position: .....

Date: .....

**Please return application form and payment to:**

Hull City Council  
Trading Standards Service  
33 Witham  
Hull  
HU9 1DB

Payment can be made over the phone by contacting us on 01482 615552  
Or by cheque, please make cheque payable to: Hull City Council