



Sri Lanka Logistics & Freight Forwarders Association

Dear Sir/Madam,

SLFFA MEMBERSHIP APPLICATION FORM – ORDINARY MEMBER

Further to your request for a new application, please find enclosed the membership application form of the Sri Lanka Logistics & Freight Forwarders Association. The criteria for membership of the Association are that a company should:

- i) Be actively involved in International Freight Forwarding for not less than 1 year in Sri Lanka and having a minimum paid up capital of Rs. 1,000,000.00;
- ii) Have on its staff a person in the capacity of a Director or General Manager who has a minimum of five years experience in the field of international freight forwarding (please include supporting documents).
- iii) Have obtained forwarders all liability insurance cover from a recognized insurance company.
 - Legal Liability USD 100,000/-
 - Errors & Omissions USD 50,000/-

An application for membership should include,

- a) Memorandum and Articles of Association of the Organization
- b) Copy of Business Registration
- c) Copy of Form 48 or Form 20 (as applicable)
- d) Certification of Paid up Capital from applicant's auditors
- e) Original copies of all B/L and negotiable documents currently issued
- f) Liability Insurance Coverage.
- g) Letter from Principals, if any, confirming the relationship.
- h) References from the Chairman, MD or CEO of two SLFFA member Companies of which one should be from the Executive Committee.
- i) Copy of Director Merchant Shipping Registration.

Should you require any further clarification please do not hesitate to contact the undersigned on Tel. No: 0772 365887 or 4943031.

Yours faithfully,

SRI LANKA LOGISTICS & FREIGHT FORWARDERS ASSOCIATION

Sgd.

**Erandi Ponnampereuma
Manager**

SRI LANKA LOGISTICS & FREIGHT FORWARDERS ASSOCIATION

MEMBERSHIP APPLICATION FORM (Ordinary Member)

1) Name of Company :

2) Address :

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Tel :

Fax :

E-mail :

Web-site :

3) **Details of Key Personnel**

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(a) Chief Executive Officer

Name :

Tel : Direct :

Fax : Email :

(b) Qualifications and Experience in the Industry

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(c)Key Staff

i) Air Freight

Name	Designation	Experience
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ii) Ocean Freight

Name	Designation	Experience
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4) Type of Company

(i) Limited Liability
 Public Private

(ii) Other (Specify)

(iii) BOI status Yes No

5) Company Registration No :

6) Date of Establishment :

7) No. of Employees :

8) Capital Structure

Authorized :

Issued :

9)	Principal Share Holders	No. of Shares
(i)
(ii)
(iii)

10) Board of Directors

Name (s)	Address	Status (Executive or Non Executive)
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11) Details of Overseas Agents or Principals

Name (s)	Address	Contact Details (Tel : Fax : E-mail)
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12) Type of BL Issued (Enclose Copies)

(i) (ii) Princ (iii) Oth

13) Bankers :
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Branch Address of
Principal Bankers
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14) Auditors :

Address & Contact Details :
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15) Turnover

(i) Last Year

(ii) Previous Year

16) Membership of Trade Associations

<u>Association</u>	<u>Date of Enrolment</u>
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17) Details of Liability Insurance Coverage

(i) Have your Company obtained a freight forwarders all liability insurance cover?

Yes

(ii) If so give details

Insurance Company :
Contact Details of the Insurer :

Coverage Limit :

Validity Period :

18) Details of registration with Exchange Control Department

Registration No : Date :

DECLARATION

We hereby declare that the particulars furnished above regarding our company are true and correct.

We hereby agree to abide by the Memorandum and Articles of Association of the Sri Lanka Logistics & Freight Forwarders Association, all by laws and regulations enacted from time to time and decisions of the Association relating to the industry. We further agree to conduct our business in accordance with the Standard Trading Conditions of the Association.

We herewith enclose Cheque No..... dated for **Rs. 100,000/-**, drawn in favour of the Sri Lanka Logistics & Freight Forwarders' Association being the Entrance fee (Rs.50,000/-), Membership Subscriptions (Rs.20,000/-) and Facilitation Fee (Rs.30,000/-).

Name of CEO :

Signature :

Name of Director :

Signature :

Date :

OFFICE USE ONLY

Approved on :

Signature :

Comments :