

APPLICATION FOR ALLIED MEMBERSHIP

(Return this form to Tel: (679) 3306-022 or Internet e-mail: ppa@ppa.org.fj)

ORGANISATION		
Organisation Name:		
Mailing Address:	0''	
	Postcode: Country:	
	[_]	mail:
Website Address:		
Courier Address:		
CHIEF EXECUTIVE OFFICER		
Prof / Dr / Mr / Mrs / Miss Surname:	Given Name:	
Title:		
ROUTINE CONTACT PERSON FOR PPA (Person	for PPA to send correspondence to)	
·	Giv	an.
_		
Title:		
BUSINESS ACTIVITIES (Refer to attached list fo	r relevant activity categories)	
Primary Activity:		
Secondary Activity:		
EQUIPMENT AND SERVICE CATEGORIES (Mark Equipment Category Cable Accessories Cables Communications Computer Systems Control & Monitoring Systems Cooling Systems Domestic Electrical Accessories Hand & Line Tools Information Systems/Software Services Category Demand Side Management Design Services Electrical Repairs Financial Services Installation Services Energy Efficiency PAYMENT DETAILS / FUNDS ENCLOSED:	with an "X" each category you wish to be Equipment Category Insulators Lighting Maintenance Systems Mechanical Auxiliary Systems Metering & Instrumentation Poles Power Generation Protective Devices Renewable Energy Systems Services Category Lubricants & Fuels Mechanical Repairs Power System Studies Procurement/Evaluation Services Project Management	Equipment Category Silencers SCADA Storage Tanks Switchgear Transformers Vehicles Ventilation Fans Voltage Control Services Category Resource Planning Testing Service Training Turnkey / Design Build Utility Management
Application Fee 1st Year Membership Fee TOTAL PAID WITH APPLICATION	\$100 \$2,500	
Please note: Payment should be by Internated Telegraphic Transfer to Pacific Power As Account: 159371130 (USD Bank: Bred Bank (Fiji) Level 5, Tappoo (sociation's Bank Account as follow	ws: