

## Membership Application

### LANDSCAPE GARDENER – Provisional

REGISTERED BUSINESS NAME

TRADING NAME (if different)

BUSINESS ADDRESS

POSTAL ADDRESS (if different)

REGISTERED BUSINESS ADDRESS

Same as physical address

ABN

YEAR BUSINESS REGISTERED (certificate to be attached)

WEBSITE

BUSINESS TYPE

Sole Trader

Company

Partnership

Family Trust

SIZE OF BUSINESS

1—3

4—6

7—9

10+

#### MAIN CONTACT

NAME

POSITION

PHONE

EMAIL

#### SECONDARY CONTACT (Business Partner, or secondary person to receive LV communications)

NAME

POSITION

PHONE

EMAIL

#### ACCOUNTS CONTACT (book keepers/accounts contact etc.)

NAME

POSITION

PHONE

EMAIL

#### MAIN FOCUS OF BUSINESS (please tick)

<input type="checkbox"/>	LANDSCAPE DESIGN	<input type="checkbox"/>	OTHER (PLEASE SPECIFY BELOW)
<input type="checkbox"/>	SOFT LANDSCAPING ELEMENTS	<input type="checkbox"/>	

#### WHERE DID YOU HEAR ABOUT US?

<input type="checkbox"/>	Website	<input type="checkbox"/>	Radio
<input type="checkbox"/>	Social Media	<input type="checkbox"/>	Client (member of the public)
<input type="checkbox"/>	Industry Event	<input type="checkbox"/>	Referred by member – Name & Member Number
<input type="checkbox"/>	Magazine/Newspaper	<input type="checkbox"/>	Other – Please specify



## Membership Application

### LANDSCAPE GARDENER – Provisional

#### EMPLOYMENT HISTORY (include apprenticeship)

YEARS (to from)	EMPLOYER	POSITION

#### INDUSTRY QUALIFICATIONS AND TRAINING

Note: To qualify for this membership category, minimum qualifications apply:

- ☞ Certificate III in Horticulture, Nursery or Parks & Gardens
- ☞ OR 10+ years experience (as outlined above in Employment History)

COURSE NAME	TRAINING INSTITUTION	YEAR COMPLETED

#### OTHER QUALIFICATIONS/MEMBERSHIPS (contact names and numbers if available)


### SKILLS ASSESSMENT

Please nominate 3 projects that have been completed (i.e. have been built) in the last 2 years that best reflect the quality and breadth of your workmanship and skills. Please seek your client's approval prior to submitting their garden.

**NOTE: Following the submission of your application, please send an email through to [admin@landscapingvictoria.com.au](mailto:admin@landscapingvictoria.com.au), containing at least 15 photos across the 3 jobs listed below, which relate to the plans submitted (for designer applicants) or that cover all relevant aspects of soft landscaping (planting, turf, loose surfaces, rock work etc) (for landscape gardener applicants). Your work quality will be assessed based on these images, so please make sure they are of sufficient quality. We would recommend sending the photos through using a file sharing site such as Dropbox or WeTransfer. Alternatively, you may submit a USB containing these images with your application.**

#### SITE 1

NAME OF CLIENT/S	
EMAIL ADDRESS	
ADDRESS	
CONTACT NAME & NUMBER (to arrange visit)	
APPROX. VALUE OF PROJECT	

#### YOUR ROLE IN THIS PROJECT (please tick)

<input type="checkbox"/>	PLANTING PLANTS	<input type="checkbox"/>	PLANT REMOVAL AND RELOCATION
<input type="checkbox"/>	TURF INSTALLATION	<input type="checkbox"/>	MAINTENANCE SERVICES
<input type="checkbox"/>	IRRIGATION	<input type="checkbox"/>	HORTICULTURAL SERVICES
<input type="checkbox"/>	DESIGN	<input type="checkbox"/>	OTHER (please specify)

Please provide a written quote/contract (or both) for this project by attaching a copy to your application.

#### SITE 2

NAME OF CLIENT/S	
EMAIL ADDRESS	
ADDRESS	
CONTACT NAME & NUMBER (to arrange visit)	
APPROX. VALUE OF PROJECT	

#### YOUR ROLE IN THIS PROJECT (please tick)

<input type="checkbox"/>	PLANTING PLANTS	<input type="checkbox"/>	PLANT REMOVAL AND RELOCATION
<input type="checkbox"/>	TURF INSTALLATION	<input type="checkbox"/>	MAINTENANCE SERVICES
<input type="checkbox"/>	IRRIGATION	<input type="checkbox"/>	HORTICULTURAL SERVICES
<input type="checkbox"/>	DESIGN	<input type="checkbox"/>	OTHER (please specify)

Please provide a written quote/contract (or both) for this project by attaching a copy to your application.

#### SITE 3

NAME OF CLIENT/S	
EMAIL ADDRESS	
ADDRESS	
CONTACT NAME & NUMBER (to arrange visit)	
APPROX. VALUE OF PROJECT	

#### YOUR ROLE IN THIS PROJECT (please tick)

<input type="checkbox"/>	PLANTING PLANTS	<input type="checkbox"/>	PLANT REMOVAL AND RELOCATION
<input type="checkbox"/>	TURF INSTALLATION	<input type="checkbox"/>	MAINTENANCE SERVICES
<input type="checkbox"/>	IRRIGATION	<input type="checkbox"/>	HORTICULTURAL SERVICES
<input type="checkbox"/>	DESIGN	<input type="checkbox"/>	OTHER (please specify)

Please provide a written quote/contract (or both) for this project by attaching a copy to your application.



### REFERENCES

You are required to provide:

- ☞ one industry reference (including a written letter of reference – this can be attached with your application or sent directly to admin@landscapingvictoria.com.au ), and
- ☞ two credit references

### INDUSTRY REFERENCE (LV member preferable, or a contact working within the landscape industry)

NAME	BUSINESS	PHONE
EMAIL		

### CREDIT REFERENCE (suppliers you regularly purchase goods or services from)

NAME	BUSINESS	PHONE
EMAIL		
NAME	BUSINESS	PHONE
EMAIL		

### APPLICATION CHECK-LIST (please ensure all of the below items are included prior to submitting your application)

**Incomplete applications will not be processed.**

Certificate of Business Registration	
Proof of Industry Qualification	No. of Qualifications included
Other Qualifications/Memberships	
Certificate of Currency (Public Liability Insurance) If you do not have insurance we recommend you contact our preferred partner Insurance House on 03 9235 5207. LV Members receive a free insurance 'Health Check' across their insurance program. To take up this obligation free offer tick <b>YES</b> and a specialist broker will contact you to arrange an appointment.	YES
Business Plan/Outline (a one-page summary of your business objectives) If you do not have a Business Plan, suitable templates are available here: <a href="http://www.business.vic.gov.au/setting-up-a-business/how-to-start-a-business/write-a-business-plan">www.business.vic.gov.au/setting-up-a-business/how-to-start-a-business/write-a-business-plan</a>	
OH&S Policy (outline of your safe working environment including safety equipment, chemical handling etc.) If you do not have an OH&S Policy, please book an appointment with Worksafe Victoria. <a href="http://www.worksafe.vic.gov.au/safety-and-prevention/small-business/worksafe-ohs-essentials-program">www.worksafe.vic.gov.au/safety-and-prevention/small-business/worksafe-ohs-essentials-program</a>	
Letter of Reference (Industry)	
Required images as outlined on Page 3	

#### CODE OF CONDUCT

Members of Landscaping Victoria Incorporated believe that the interests of the community at large can best be served through the observance of a Code of Ethics which recognises that community confidence in the landscaping industry is enhanced by:

- ☞ Honesty and Courtesy
- ☞ Skill and Competency
- ☞ Integrity for work and Industry

To further these aims, Landscaping Victoria members are expected to:

- ☞ Enhance and foster professional and ethical practice in rendering services;
- ☞ Maintain the highest standards of honesty and integrity to clients, fellow members and the community;
- ☞ Comply with all laws and regulations in the conduct of their business;
- ☞ Encourage educational development and training at all times;
- ☞ Encourage a spirit of harmony and co-operation between members;
- ☞ Act in a manner which advances the standing of the industry in the community.

#### DECLARATION

I certify that the information contained in this application is true and correct.

I hereby agree, if accepted for membership of Landscaping Victoria, to be bound by the Terms and Conditions of the Association, found [here](#), and the above Code of Conduct.

In the event I am no longer a member of Landscaping Victoria, I agree to remove all reference to membership and I will cease to use the LV logo and any written reference to being a member. I will advise Landscaping Victoria of my resignation in writing as per the Terms and Conditions of the Association.

NAME	SIGNATURE
DATE	

**DISCLAIMER:** Landscaping Victoria retains the right to accept or reject an application. Completion of application may take up to 12 weeks. All benefits attributed to each membership will be valid and must be utilised within that financial year. No refund of credit will be issued for unused components of memberships.

#### FEES

Application Fee: \$295	An invoice will be sent to you upon receipt of this application. Application fees are not refundable once an application has been made. If application is successful, an invoice for annual membership will then be sent.
Provisional Membership Fees: \$500 pa	Membership Fees are invoiced and payable upon confirmation of a successful application. Provisional Fees are invoiced as at your calendar date of joining LV. Once you obtain full membership (i.e. you are no longer a Provisional Member) fees are invoiced as at June 30.

#### WHAT HAPPENS NOW?

	TIME FRAME
1. Application is reviewed by Landscaping Victoria administration	1 week
2. If approved to proceed, assessment you will: a) be notified in writing b) be invoiced for the application fee	1 week
3. Upon receipt of payment your file will be sent to the Membership Portfolio for assessment	2 weeks
4. If approved by the Membership Portfolio, your application will be reviewed by the Board at the next gazette Board Meeting	Subject to Board Meeting
5. If approved for membership you will: ☞ be notified in writing ☞ invoiced for subscription fees	1 week
6. Upon approval for Membership by the Landscaping Victoria Board you will be invoiced for a subscription fee. On receipt of your Membership fee in full you are recorded as a Member of the Association and will have entitlement to the Associations benefits and entitlements, applicable in your nominated category. Membership fees are payable in advance, with rates applicable to the various Membership groups of Landscaping Victoria Membership reviewed and set by the Board each year. No concessions or discounts are applicable to Membership fees. Upon receipt of payment you will be sent a Membership Pack with full details of your benefits, your obligations and your membership login details.	1 week

If you have any queries, please call the Landscaping Victoria office on 1300 365 428.

***We wish you every success in your application.***