

**PARTICIPANT HOLIDAY PAY & BENEFIT SCHEME
ENROLMENT APPLICATION FORM**

EMPLOYER'S NAME & ADDRESS	TEL.	
	FAX	
	E-Mail	
	COMPANY BANK DETAILS	
	BANK:	
	SORT CODE:	
	ACCOUNT NUMBER:	
POSTCODE	ACCOUNT NAME:	

EMPLOYER'S STATEMENT

I/We wish to operate the JIB for PMES Participant Holiday Pay & Benefit Scheme and have completed the statement overleaf/as attached of all relevant employees to be included therein for whom I/we require holiday credits to be charged for by monthly invoice.

Signed:		Printed name of signatory:
Preferred date / period for start of Invoices:		
Preferred Method Of Payment To JIB:		CHEQUE BACS

INSTRUCTIONS

1. Please complete ALL SECTIONS of this form in BLOCK CAPITALS or typed
2. Ensure this form is SIGNED and DATED
3. Provide details of all PMES employees including STATUS on Page 2. A computer print-out may be submitted instead (see page 3 Note 1)
4. Please return this application to the above address

For additional notes and guidance please refer to Page 3 of this form

IMPORTANT NOTE! TO PAY INVOICES BY BACS TRANSFER, PLEASE USE THE FOLLOWING DETAILS:

BARCLAYS BANK PLC	SORT CODE	20-74-81
41 HIGH STREET	ACCOUNT No.	20281662
ST. NEOTS	ACCOUNT NAME	JIBPMES HOLIDAY CREDITS
CAMBS, PEI9 1AS		

GUIDANCE NOTES

1 **STATEMENT OF PMES EMPLOYEES.** A computer print-out may be submitted as an alternative to Page 2. However, it must contain all the information required by the statement for both categories (see 2 below)

2 **PMES - EMPLOYEE CATEGORIES** (comprised as follows)

a) **PMES - OPERATIVE CATEGORIES**

TECHNICAL PLUMBER	SERVICE TECHNICIAN (GAS)	MECHANICAL PIPE FITTER
ADVANCED PLUMBER	SERVICE ENGINEER (GAS)	
TRAINED PLUMBER	SERVICE FITTER (GAS)	

b) **PMES - OTHER STAFF CATEGORIES**

APPRENTICE	WORKING PRINCIPAL (Note 3)
ADULT TRAINEE	ANCILLARY EMPLOYEE (Note 4)

3 **WORKING PRINCIPAL**

Only include the principal or director of a company if they work regularly in the tools.

4 **ANCILLARY EMPLOYEE**

Other staff who are connected with the PMES related side of the business may be included e.g. storeman, driver etc.,

5 **INVOICES**

On receipt of this form the JIB will issue the first monthly invoice.

6 **BENEFIT SCHEME DOCUMENTATION**

This will be provided once your first invoice payment has been received.



**Initial
STATEMENT OF UNDERTAKING
to be a
JIB-PMES PARTICIPANT EMPLOYER**



Name of Applicant Company	
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The above named Company hereby applies to be enrolled as a Participant Employer of the JIB-PMES with effect from the date indicated below. They hereby agree that they shall at all times be bound by the JIB-PMES Constitution and Rules and shall observe and comply fully with all rules, obligations and provisions relating to the operation of the JIB-PMES Holiday Pay & Benefits Scheme. In addition they agree to accept, observe and comply with all decisions, regulations and agreements of the JIB-PMES and to operate, as a minimum, the terms and conditions of the National Working Rules (NWRs) of the Industry as laid down by the JIB-PMES and in particular that:

ALL eligible PMES operatives/employees of the Company shall be covered under the JIB-PMES National Working Rules and shall at all times be:

- a] included in the JIB-PMES Holiday Pay & Benefits Scheme. [See note 1 below]
- b] paid the relevant amount of JIB-PMES Sickness Benefit, notwithstanding any receipt of such benefit from the JIB-PMES. [See note 1 below]
- c] enrolled immediately in the Plumbing Industry Pension Scheme or such equivalent scheme, subject to their right to "Opt Out", which should be evidenced in writing.
Please Enter Plumb. Pens. Econ Number
- d] obliged to hold a current JIB-PMES/CSCS Registration card and to apply for grading where applicable. [See note 1 below]

The Company acknowledges that it has received and read the JIB-PMES Constitution & Rules Book and the current edition of the National Working Rules Book.

The date from which the Company's participation is to commence shall be

Monday	
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Signed on Behalf of the Company: Date:

Status in Company of Person Signing Acceptance Statement

Guidance Notes

1. Please TICK each box above to indicate acceptance or enter N/A to indicate that a clause does not apply.
2. If you operate the Plumbing Industry Pension Scheme please enter the ECON number if known. If another company pension scheme is in place – please enter OTHER and provide details of the scheme.
3. To be classified as a JIB-PMES PARTICIPANT EMPLOYER each box above must be ticked affirmatively and either the Industry Pension Scheme or one providing at least equivalent benefits, particularly Death Benefit of twice a person's current pay, must be in place.
4. Where applicant companies are unable to completely comply with all the above requirements they may still apply to operate the JIB-PMES Holiday Pay & Benefits Scheme but they will not be regarded as a JIB Participant Employer.