



STIA MEMBERSHIP NO: _____

Date: _____

Category of membership: ASSOCIATE MEMBER

Main activities related to: Sawmilling/K.D./Moulding/Veneer/Plywood
Blockboard/Wood Preservation/Laminated Board/Flooring
Export/Furniture/Furniture Parts/Others: _____

APPLICATION FOR MEMBERSHIP

I/We, the undersigned hereby apply for membership of the SABAH TIMBER INDUSTRIES ASSOCIATION and hereby agree with the Committee thereof, and with each and every present and future member thereof that I/We will conform to and be bound by the rules and regulations of the Association for the time in force, or from time to time to be ordained, and the interpretation and construction thereof by the Committee, or any member or members of the committee to whom the committee may duly delegate their powers, and also that I/We will comply with and abide by and carry out every notice, summons, decision and directions of the Committee which shall affect me/us.

Date:.....day of20.....

Signed by the said (_____)
(_____) Designation

in the presence of (_____)
(_____) Designation

Enclose is cheque No:for RM2,000 as Entrance Fee and RM1,500.00 per year as subscription fee payable to the Association.

Name of Company:

Address :
.....

We, the undersigned proposer and seconder, being members of the Association, do declare that we are satisfied that the above fully qualifies for the membership as provided for in the Rules and Regulations of the Association.

Proposer: _____ Seconder: _____
(_____) (_____)

Note: For Cheques Payment – All must be crossed and made payable to: “Sabah Timber Industries Association. For Online Payment – Online Transfer is made payable to: Alliance Bank Malaysia Berhad (ABMB): 100-3900-1000-7200

**Lot 25 & 26, Block E, 1st Floor, Phase III, Damai Plaza, Luyang Commercial Centre
88300 Kota Kinabalu. P O Box 20317, 88760 Luyang, Kota Kinabalu.
Tel : 6-088-249186/016-8339186 Fax: 6-088-233516
Email: stia@stia.com.my/stiakk@stia.com.my Website: www.stia.com.my**



PARTICULARS OF APPLICANT

1. Name of Firm:.....
2. Address:.....
3. Postal address:.....
4. Telephone Numbers: 5. Fax:.....
6. E-mail: 7. Homepage:.....
8. Sole Proprietor (please provide name):.....
Or Partnership (please provide Director/s Name/Names
.....
9. Name of Partner/Manager/Employee directly in-charge:
.....
10. Date of commencement of business:.....

Signature of Candidate & Company Chop

.....

Clause 5: Class of Members

Associate Members

Associate member is open to persons (including individuals and companies, incorporated and unincorporated), who carry on the business relating to the business of timber, sawmilling, sawn timber downstream timber processing industry and export in Sabah. Associates members shall enjoy the privileges of ordinary membership but shall not be entitled to vote or hold office in the Association (ie to become a committee member) or to attend any meetings.

Supporting Documents: Form 24, Form 49 & Trading license

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