



## 2019 International Kitchen Exhaust Cleaning Association Active North American Membership Application

**Active North American Membership** - Defined as those companies that provide cleaning services of kitchen exhaust systems located in North America. Annual dues are \$925.00 USD/year. Active North American Members have voting privileges.

**STEPS TO BECOMING A MEMBER:**

1. Complete the following membership application including company background information
2. Submit proof of the following insurance coverage:
  - a. A minimum of \$2,000,000.00 in Liability and Completed Operations Insurance
  - b. Worker's Compensation Insurance
  - c. Vehicle Insurance
3. Have at least one employee achieve the CECS or CESI certification
4. Submit all appropriate fees
5. Review and sign verifications

**Membership is not active until the primary contact receives written approval by IKECA.**

**STEP 1: MEMBERSHIP APPLICATION**

Member Information (please print clearly or type)			
Company Name:			
Main Address:			
City, State/Province, Zip/Postal Code:			
Billing Address: <i>(if different from main)</i>			
City, State/Province, Zip/Postal Code:			
Telephone:		Fax:	
Website:			
Primary Contact: <i>(All official notifications will be sent to this person – email is mandatory.)</i>	Name:	Email:	
	Title:	Phone:	
Secondary Contact:	Name:	Email:	
	Title:	Phone:	
<a href="#">Find A Member</a> Online Listing:	Which address should we list in the online member directory? <input type="checkbox"/> Main <input type="checkbox"/> Billing		
Referred by?:	Name: _____ Company: _____		

*Please continue on next page.*



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### COMPANY BACKGROUND INFORMATION

**IKECA reserves the right, at its sole discretion, to deny an application based on responses to these questions.**

**Completing this section is mandatory;** failure to respond to each question (except for #6) will result in the application being returned. Failure to provide accurate and true information constitutes grounds for denial of your membership application, or termination of your membership. If the applicant answers "Yes" to any of questions 1-4, a written explanation of the incident that occurred as well as any copies of relevant documents **MUST** accompany this application. Please submit it as a separate document.

Has the Applicant:

1. Ever violated or infringed upon any IKECA intellectual property, including but not limited to, IKECA trademarks?  Yes  No
2. Ever been deemed or found to be in noncompliance with any state, local or federal law?  Yes  No
3. Ever failed to obtain a license or authorization needed to conduct business?  Yes  No
4. Been a defendant in civil litigation in which the basis of the complaint against the applicant alleged negligence, malpractice, lack of professional conduct or fraud?  Yes  No
5. Is the company located at the exact address provided on the application? If not, please explain the discrepancy.  Yes  No
6. Please provide the name and address of the Authority Having Jurisdiction (AHJ) closest to the address listed on this application.

### STEP 2: SUBMIT PROOF OF INSURANCE

In addition to completing the expiration dates for each insurance type below, please attach copies of a certificate of insurance (COI) for each. **Please note that if membership is approved, updated COIs must be maintained at IKECA Headquarters in order to maintain membership eligibility.**

- |   |                       |
|---|-----------------------|
| <input type="checkbox"/> <b>Liability Insurance (2 million aggregate)</b> | <b>Expires:</b> _____ |
| <input type="checkbox"/> <b>Vehicle Insurance</b>                         | <b>Expires:</b> _____ |
| <input type="checkbox"/> <b>Workers' Compensation</b>                     | <b>Expires:</b> _____ |

### STEP 3: SCHEDULE A CERTIFICATION EXAM

#### Certification Applicant Information

Exam Type:	<input type="checkbox"/> Certified Exhaust Cleaning Specialist (CECS) <input type="checkbox"/> Certified Exhaust System Inspector (CESI)
Applicant Name:	_____
Applicant Email (mandatory):	_____
Candidates Affiliation with Company:	<input type="checkbox"/> Owner <input type="checkbox"/> Manager <input type="checkbox"/> Employee <input type="checkbox"/> Other: _____
Exam Date Requested:	Date: _____ Time: _____ <i>Note – 15 business days advanced noticed is required; submissions with less of a window are subject to a \$315.00 rush fee. (you must notify us three days in advance in order to get your exam application processed on time).</i>
Location of Exam:	_____ <i>Please note that only third party locations such as libraries, testing centers, or universities will be accepted.</i>

#### Private Proctor Information (and Translator Proctor)

Exams taken outside of IKECA meetings must be privately proctored. It is your responsibility to identify a private proctor, coordinate the exam date and time in conjunction with IKECA, pay any applicable proctor fees, and provide the following information about the proctor. You may also have a third-party translator proctor the exam and delivery it verbally for those whose primary language is not English. See note number seven (7).



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Proctor Name:			
Proctor Company/Organization:			
Mailing Address:			
City, State/Province, Zip/Postal Code:			
Telephone:		Email:	

- IMPORTANT NOTES:**
1. Three hours are allowed to complete the CECS Exam; please schedule appropriately.
  2. Two hours are allowed to complete the CESI Exam; please schedule appropriately.
  3. Certification applications are due 15 business days prior to requested test date. Exams scheduled earlier are subject to a **\$300 rush fee**.
  4. **No refunds shall be provided for the exam**; fees may be credited to a future exam if IKECA Headquarters is notified in writing within five business days of the approved exam date. This credit will be valid for a period of 90 days.
  5. IKECA certification exams shall be administered in accordance with the requirements set forth in the Americans with Disabilities Act (ADA). If you require special assistance or unique conditions in taking the exam as a result of a disability or physical impairment, please contact IKECA Headquarters for more information.
  6. Study materials may be purchased in [our online store](#).
  7. For those individuals whose first language is not English, IKECA will accept third-party, pre-approved translators to deliver the exam verbally and serve as a proctor for the exam. For more details, visit <http://www.ikeca.org/certification/exam-application-and-resources/>.

### STEP 4: SUBMIT APPROPRIATE FEES

Payment Information - All Fees Must be Submitted in USD.			
Application Fee	\$250.00 <i>(Please note that the application fee is non-refundable.)</i>		\$ 250.00
Membership Fee	\$925.00		\$ 925.00
<b>Certification Exam Fees</b>	<input type="checkbox"/> CECS: \$350 + <input type="checkbox"/> Domestic Shipping: \$20 OR <input type="checkbox"/> International Shipping: \$35		
<b>Shipping Fees</b>	<input type="checkbox"/> CESI: \$425 + <input type="checkbox"/> Domestic Shipping: \$20 OR <input type="checkbox"/> International Shipping: \$35 <i>(Member rates honored when submitted with membership application)</i>		\$ _____
<b>Exam Rush Fee</b>	<input type="checkbox"/> Exam Rush Fee: \$315		\$ _____
Study Guides (optional)	<input type="checkbox"/> CECS Study Guide: \$85 + <input type="checkbox"/> Domestic Shipping: \$20 OR <input type="checkbox"/> Intl Shipping: \$35 <input type="checkbox"/> CESI Study Guide: \$60 + <input type="checkbox"/> Domestic Shipping: \$20 OR <input type="checkbox"/> Intl Shipping: \$35		\$ _____
Type (select one): Check # _____ <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Amex <input type="checkbox"/> Discover			\$ _____
<b>Total Due</b>			
Credit Card Number		Exp. Date	
Signature		Date	



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## STEP 4: VERIFICATIONS

### CODE OF PROFESSIONAL CONDUCT – FOR INDIVIDUAL SITTING FOR CERTIFICATION EXAM

No individual is eligible to apply for or maintain certification unless in compliance with all IKECA rules, practices, policies and procedures, including but not limited to those stated in the [IKECA Bylaws](#), [Membership Policies & Procedures](#), Code of Ethics and the [Exam Code of Conduct](#). An individual may not make and shall correct immediately any statement concerning the individual's status that is or becomes inaccurate, untrue, or misleading. Any change in facts or events bearing on eligibility or certification must be reported to IKECA within sixty (60) days of the change.

IKECA does not warrant the performance of any individual or company. In accordance with IKECA rules and procedures, IKECA may deny certification or render sanctions against an applicant or certificant in the case of:

1. Ineligibility for IKECA certification;
2. Irregularity in connection with any IKECA examination;
3. Failure to pay fees required by IKECA;
4. Unauthorized possession of, use of, or access to IKECA examinations, certificates, cards, and logos of IKECA, the name "International Kitchen Exhaust Cleaning Association," IKECA certification designations, the term "IKECA," and any other IKECA documents and materials;
5. Obtaining or attempting to obtain certification or recertification by a false or misleading statement or failure to make a required statement, fraud or deceit in an application, reapplication or any other communication to IKECA;
6. Misrepresentation of IKECA certification or certification status;
7. Failure to provide or update any information required by IKECA;
8. Gross or repeated negligence in professional work;
9. False or misleading advertising relating to kitchen exhaust cleaning work;
10. Limitation or sanction (including but not limited to revocation or suspension by a regulatory board or professional organization) relating to kitchen exhaust cleaning and/or public health;
11. The conviction of, plea of guilty or plea of nolo contendere to a felony or misdemeanor related to kitchen exhaust cleaning and/or public health and safety;
12. Failure to abide by applicable bonding and/or licensing regulations;
13. Failure to comply with IKECA Guidelines & Best Practices and NFPA Standards for kitchen exhaust cleaning;
14. Habitual use of alcohol or any drug or substance, or any physical or mental condition, which impairs competent and objective professional performance;
15. Other violation of an IKECA rule, practice, policy or procedure as provided in any IKECA brochure or other material provided to candidates or certificants.

By signing below, I certify that all information contained in this application is true and accurate to the best of my knowledge. I authorize the International Kitchen Exhaust Cleaning Association, its officers, directors, committee members, employees, agents and divisions ("IKECA") to review my application and I will cooperate promptly and fully in such review. I will submit to IKECA such documents and information deemed necessary to confirm the information in this application. All documents submitted to IKECA are the property of IKECA and will not be returned to me. I authorize IKECA to communicate any information relating to my application, certification and review thereof, including but not limited to pendency or outcome of actions taken pursuant to IKECA's Code of Professional Conduct, to state and federal authorities, licensing boards, employers, other certificants, and others. I release, discharge and exonerate IKECA for any action taken relating to such review, including denial of my application, revocation, suspension or other sanction. I agree to indemnify and hold harmless IKECA for any action taken pursuant to the rules and standards of IKECA with regard to this application, and/or my certification. I acknowledge that I have read and understood this information, the IKECA Code of Professional Conduct and agree to abide by these terms and rules.

#### Individual Sitting for Certification Exam Must Read and Sign this Code of Conduct:

Name (*print*) : \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



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## IKECA CODE OF ETHICS

By submitting this application for membership, you agree to uphold IKECA's Code of Ethics:

1. To, at all times, serve our clients with integrity, competence and objectivity;
2. To perform all work for clients in accordance with the latest standards and practices published by IKECA;
3. To clean all readily accessible areas of the kitchen exhaust removal system, utilizing positive cleaning methods and techniques consistent with proactive by-product management;
4. To strive to comply with all applicable municipal, state and national codes and guidelines during the course of business engagement;
5. To ensure that safety of life and property remain an integral operations effort;
6. To strive to comply with all applicable industry-related environmental standards, and practice with ongoing awareness as continuing education advances the industry;
7. To operate with a good working knowledge of available products and to specify, where applicable, those accepted within the industry as efficient and effective;
8. To establish initial and ongoing documentation consistent with local, state and national guidelines regarding kitchen ventilation by-product management service schedules and scope;
9. To strive to continue education consumers, neighboring industries and authorities with respect to kitchen exhaust removal systems;
10. To strive to operate morally, ethically and in good conscience during the course of maintaining kitchen exhaust removal systems;
11. To obey local, state and federal laws, rules and regulations as they pertain to our industry;
12. To remain within compliance of the policies, standards and practices and by-laws of the International Kitchen Exhaust Cleaning Association.

## Signature

By signing below, I certify that all information contained in this application is true and accurate to the best of my knowledge. I authorize the International Kitchen Exhaust Cleaning Association, its officers, directors, committee members, and agents to review my application, and I will cooperate fully in such review. I will submit to IKECA such documents and information deemed necessary to confirm the information in this application. All documents submitted to IKECA are the property of IKECA and will not be returned to me. I acknowledge that I have read and understood this information, the [IKECA Code of Ethics](#) and agree to abide by these terms and rules. I have read and understood the [Membership Policies and Procedures](#) and [Bylaws](#) and grant IKECA permission to opt me into future communications including email and phone. I understand that failure to comply with these is just cause for disciplinary action not to exclude expulsion from the membership.

**I UNDERSTAND THAT ONCE MY APPLICATION IS SUBMITTED, MY COMPANY WILL HAVE 90 DAYS TO HAVE AT LEAST ONE EMPLOYEE SUCCESSFULLY PASS THE CECS OR CESI EXAM. I FURTHER UNDERSTAND THAT HIS MEMBERSHIP WILL BE ACCEPTED AS COMPLETE ONLY AFTER I HAVE SUBMITTED ALL REQUIRED PROOFS OF INSURANCE, AND SUCCESSFULLY CERTIFY A CECS OR CESI EMPLOYEE ON MY STAFF.**

**UNTIL SUCH A TIME THAT MY MEMBERSHIP IS APPROVED, I ACKNOWLEDGE THAT MY COMPANY IS NOT CONSIDERED A MEMBER OF THE ASSOCIATION AND HAS NO CLAIM TO SUCH DESIGNATION OR ANY BENEFITS NOTED HEREIN, INCLUDING ANY USE OF THE IKECA LOGO IN ANY FORM, OR OTHER ANCILLARY BENEFITS.**

Signature:

Date:

Name (print):

Title: