



# APPLICATION FOR SUPPLIER MEMBER (Non-Voting)

**Membership Period: January 1 – December 31, 2017**

Membership Fee: \$2,500 (plus one-time \$250 application fee = \$2,750 total)

**Payment Type:**     Check     MasterCard     VISA     American Express

Please mail checks to 400 N. Columbus St., Suite 201, Alexandria, VA 22314. If paying with a credit card, you will be contacted for payment details.

**SUPPLIER MEMBER** companies include any firm, partnership, corporation or other organization which:

1. Supports the objectives of the Association and which supplies raw materials, packaging, manufacturing equipment, or goods and services used or sold by Manufacturing Members of ILMA.

## CONTACT INFORMATION

Company Name: \_\_\_\_\_  
(COMPANY OR DIVISION OF A COMPANY)

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Company Website: \_\_\_\_\_

IF DIFFERENT FROM STREET ADDRESS

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal: \_\_\_\_\_ Country: \_\_\_\_\_

## DESIGNATED KEY REPRESENTATIVE TO ILMA

Name & Title: \_\_\_\_\_

Address:  Same as Above \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal: \_\_\_\_\_ Email: \_\_\_\_\_

## COMPANY BACKGROUND

Year Company Established: \_\_\_\_\_ Number of Employees: \_\_\_\_\_

Plant/Branch Locations: \_\_\_\_\_

Briefly describe your company's operations: \_\_\_\_\_

**THE FOLLOWING SECTIONS MUST BE FULLY COMPLETED IN ORDER TO BE REVIEWED BY THE MEMBERSHIP COMMITTEE:**

## INDUSTRY REFERENCES

1. Please identify three **ILMA Manufacturing Members** who are familiar with your operations that we can call as a reference:  
*(For a complete list, go to [www.ilma.org](http://www.ilma.org), click on "Membership" and "Member Companies.")*

Company	Contact	Phone	Email
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*both sides must be completed* ➔

**PRODUCT INFORMATION**

2. Please check the box next to the products your company produces and/or services:

**ADDITIVES**

- Acids/Solvents
- Amides/Amines
- Antioxidants
- Biocides/Fungicides
- Extreme Pressure
- Dyes/Markers/Colorants
- Rust/Corrosion Inhibitors
- Sulfonates
- Viscosity Improvers

**AUTOMOTIVE**

- 2-Cycle Oils
- Aircraft Oils
- Antifreeze
- Passenger Car Motor Oils

Heavy Duty Motor Oils

- Automotive Gear Oils
- Base Stocks
- Tractor/Hydraulic Fluids
- Automatic Transmission Fluids

**BASE OILS**

- Group I
- Group II
- Group III
- Group IV
- Esters
- Polyglycols
- Process Oils
- Waxes

**INDUSTRIAL**

- Chemical Degreasers
- Cleaners
- Food Processing Lubricants
- Industrial Gear Oils
- Industrial Engine Oils
- Hydraulic Fluids
- Synthetic Lubricants
- Textile Lubricants

**METALWORKING FLUIDS**

- Coolants
- Drawing Stamping Fluids
- Metalworking Lubricants
- Neat Oils

**OTHER**

- Additives-Aftermarket
- Fuels
- Greases
- Paints/Coating
- Specialty Chemicals
- \_\_\_\_\_

**RAILROAD**

- Engine Oil
- Hydraulic Oils

**SERVICES/PACKAGING**

- Consulting/Management Services
- Containers/Closures
- Custom/Contract Packaging
- Information Services
- Labels
- Laboratory Services
- Marketing Services
- Terminal Operations
- Used Oil Services
- Engineering Services

3. Please list your Principal Product Lines: \_\_\_\_\_

4. Please list your Company Brand name(s): \_\_\_\_\_

5. Please check the box next to the markets your company serves:

- |  |  |  |  |   |
|--|--|--|--|---|
| <input type="checkbox"/> Aerospace               | <input type="checkbox"/> Chemicals           | <input type="checkbox"/> Fuels/Gasoline      | <input type="checkbox"/> Mining              | <input type="checkbox"/> Rubber         |
| <input type="checkbox"/> Agriculture             | <input type="checkbox"/> Compounder/Blenders | <input type="checkbox"/> Governmental        | <input type="checkbox"/> Oil & Gas           | <input type="checkbox"/> Sanitation     |
| <input type="checkbox"/> Aluminum                | <input type="checkbox"/> Construction        | <input type="checkbox"/> Industrial          | <input type="checkbox"/> Packaged Lubricants | <input type="checkbox"/> Steel          |
| <input type="checkbox"/> Appliance Manufacturing | <input type="checkbox"/> Electronics         | <input type="checkbox"/> Logging/Lumber      | <input type="checkbox"/> Paints/Coatings     | <input type="checkbox"/> Textile        |
| <input type="checkbox"/> Asphalt/Paving          | <input type="checkbox"/> Elevator/Escalator  | <input type="checkbox"/> Lubricant Marketers | <input type="checkbox"/> Personal Care       | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Automotive              | <input type="checkbox"/> Fleet               | <input type="checkbox"/> Manufacturing       | <input type="checkbox"/> Plastics            | <input type="checkbox"/> Utilities      |
| <input type="checkbox"/> Aviation                | <input type="checkbox"/> Food Processing     | <input type="checkbox"/> Marine              | <input type="checkbox"/> Pulp/Paper          | <input type="checkbox"/> Woodworking    |
| <input type="checkbox"/> Bulk Lubricants         | <input type="checkbox"/> Fuel Additives      | <input type="checkbox"/> Metalworking        | <input type="checkbox"/> Refrigeration       |   |

**ALL APPLICANTS MUST SIGN**

I affirm that the information provided in this membership application is complete and accurate, and understand that any misrepresentation may result in rejection of the application or termination of membership.

I have read and our company is committed to using its best efforts to comply with ILMA's Code of Ethics. If our company has its own code of ethics or conduct that prevents the company from acknowledging ILMA's Code of Ethics, a copy of our code of ethics or conduct is attached to this membership application. I understand that ILMA has the right to test our products under its quality testing program, and our products will be included in the random generator for the program within the first year of membership.

ILMA has the company's permission to discuss this membership application with any of the references provided in the application. As part of such reference checks, ILMA is further permitted to inquire as to whether any concerns exist with our company's ability to comply with ILMA's Code of Ethics. I acknowledge that this membership application can be rejected based upon such concerns.

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