**General Contractor Application for**

**Membership in CentexAGC.**AGC Round New**rg**

Office/Plan Room 254.772.5400 voice

4500 W Waco Drive 254.772.5451 fax

Waco, Texas 76714 [www.CentexAGC.org](http://www.CentexAGC.org)

To the Membership Committee of **CentexAGC** Date:

The undersigned, being in accord with the aims, objectives and purposes of your organization and desiring to assist in the accomplishment thereof, hereby applies for General Contractor Membership in the Central Texas Chapter, Associated General Contractors of America, Inc.

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Firm Name: | | | | | | | |  | Phone: |
| Physical Address: | | | | | | | |  | Fax: |
| Mailing Address: | | | | | | | |  | eMail Address: |
| Is your entity a:  Corporation  Partnership  Single Proprietorship | | | | | | Prefer Newsletter by:  eMail  Fax | |  | Web Address: |
| How long in business  as General Contractor? | years: | Date Firm Established: | |  | Do you carry Workers Comp?:    Yes  No | | Carrier: | | |
| How long has the firm operated under this name? | years: |  | What type and scope of construction does the firm perform? | | | | | | |

Please list construction back ground of each principal officer as to former companies and positions held.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Officer |  | Company/Location |  | Position Held/Time Period |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| What type and scope of construction does the firm prefer to do: | | |
| Number of full time personnel employed: |  | What percentage of work is self-performed/Which categories: | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Financial Institution:** |  | **Address:** |  | **City, State & Zip** | |
|  |  |  |  |  | |
| **Contact Person:** |  | **eMail address:** |  | **Voice Phone:** | **Fax Phone:** |
|  |  |  |  |  |  |

I hereby give my permission to my financial institution to release any information requested by the Associated General Contractors of America (AGC).

Typed Name & Title:       Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(NOTE: APPLICATION WILL NOT BE CONSIDERED UNTIL THE REFERENCES HAVE BEEN RECEIVED.)**

GC Application, page 2 of 2

List three (3) General Contractors, preferably AGC General Contractors, as references:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Officer/Company |  | Address |  | eMail, Phone & Fax |
| 1. |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 2. |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 3. |  |  |  |  |
|  |  |  |  |  |

Construction projects in progress at the present time:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Project Name/Owner |  | Location/Type Construction |  | Design Professional/Contract Amt/% Complete |
| 1. |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 2. |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 3. |  |  |  |  |
|  |  |  |  |  |

Major construction projects complete in the past five years:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Project Name/Owner |  | Location/Type Construction |  | Design Professional/Contract Amount |
| 1. |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 2. |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 3. |  |  |  |  |
|  |  |  |  |  |

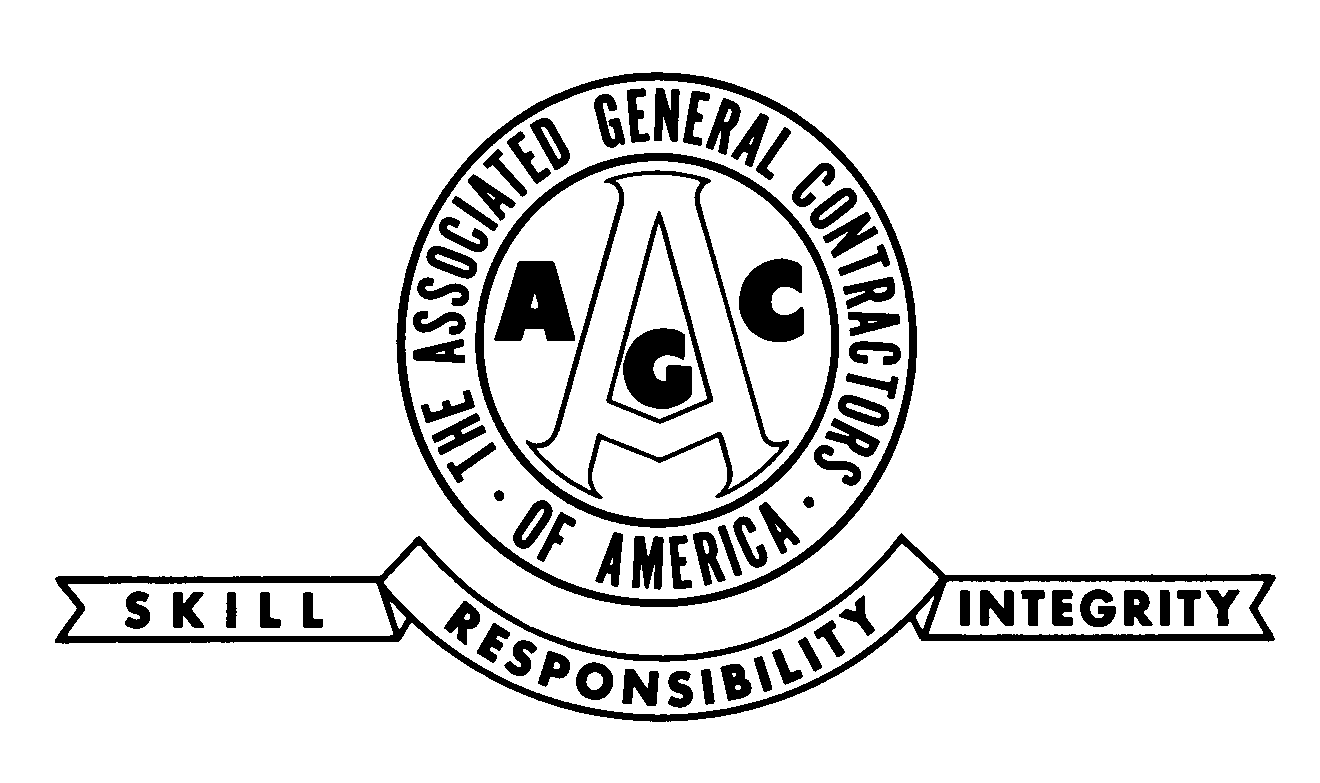
Names of Major CentexAGC Specialty Contractors Used:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Company/Contact |  | Address/Trade |  | eMail, Phone & Fax |
| 1. |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 2. |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 3. |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 4. |  |  |  |  |
|  |  |  |  |  |

Names of Major CentexAGC Suppliers Used:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Company/Contact |  | Address/Trade |  | eMail, Phone & Fax |
| 1. |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 2. |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 3. |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 4. |  |  |  |  |
|  |  |  |  |  |

Comments/Suggestions:

The Associated General Contractors of America

333 John Carlyle St., Ste. 200 \* Alexandria, V.A. 22314\* 703-548-3118 \* 703-837-5406

National Membership Application and Member Update Form

**Chapter Name**: \_\_\_\_Central Texas (45L)\_\_\_\_\_\_\_ **Date:**

**National AGC ID Number:**

***(For existing members only)***

**New Member  Change of Address  Resigned Member**

***(For address changes and resigned members, only id number and business name are needed.)***

**Gen. Contr. Member**  **Prov. Member**  **Non-Home  Specialty Contr.**  **Svc/Spplr/Mfr.**

Company Name:

Contact Person:       Title:

Officers/Title:

Street Address:

City:       State:       Zip:

Phone:       Fax:

E-mail Address:       Website Address:

***- For New General Contractor Members -***

Primary Construction Type:

Other Construction Types Performed (check all that apply):

Building  Highway  Heavy  Industrial  Municipal/Utilities  Railroad  Foreign

***- For New Specialty Contractors or Service/Supplier/Mfr.-***

Type:  (SC) Specialty Contractor  (SP) Service/Supplier/Mfr.

Specialization Code (National Associate Membership Classification):

*(This firm agrees that, out of its annual dues to the National Association, $15 shall be applied to an annual subscription to the* ***CONSTRUCTOR*** magazine and $15 to an annual subscription to the National ***NEWSLETTER***).

*If you have any questions with the above information, please contact the Membership Department at 703-837-5341*