******CentexAGC. rg**

4500 West Waco Drive, Waco, Texas 76710-7047

# Application for Associate Membership

“Word” file can be found at <https://centexagc.org/membership/apply-to-join/>

To the Membership Committee       (date)

Central Texas Chapter, AGC

Gentlemen:

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 Associate Membership in the Central Texas Chapter, Associated General Contractors of America, Inc.

|  |  |
| --- | --- |
| **Firm Name:** | **Voice Phone:** |
|       |       |
| **Street Address:** |  | **Fax Phone:** |
|       |       |
| **Mailing Address:** |  | **City, State Zip:** |
|       |       |
| **Type of Business:** |  | **Website:** |
| [ ]  Corporation [ ]  Partnership [ ]  Single Proprietorship |       |
| **Names & Titles of Officers:** | **Cell Number:** | **eMail Addresses:** |
|       |       |       |
|       |       |       |
|       |       |       |
| **Prinicipal contact with Chapter:** |  | **eMail address for primary contact with AGC:** |
|       |       |       |

The **CentexAGC News** goes out via eMail each Thursday evening. Please list eMail addresses to receive the Newsletter.

What line of business is your firm engaged in?

Are you involved full time with this business? [ ]  Yes [ ]  No

If not, what other type work are you involved in?

Give a thorough statement of your company’s business experience; date of organization, history, principals, etc:

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|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |
| [ ]  |  | [ ]  | Does your firm carry worker’s compensation insurance? |
| [ ]  |  | [ ]  | Does your firm carry general liability insurance? |
| [ ]  |  | [ ]  | Does your firm have an ongoing safety program? |
| [ ]  |  | [ ]  | Is your firm required to provide performance and payment bonds on its projects?If yes, name of bonding company:      If no, can you provide a performance and payment bond if required?       |
| [ ]  |  | [ ]  | Has your firm even been an Associate Member of any AGC Chapter under your present name or any other name?      If yes, indicate Chapter:      Give firm name, if different:       |
| [ ]  |  | [ ]  | Do your employees work on the construction job site?Which categories of work?       |

Give, as a minimum, the following references:

|  |  |  |
| --- | --- | --- |
| **AGC General Contractor:** | **Address:** | **City, State & Zip** |
|       |       |       |
| **Contact Person:** | **eMail address:** | **Voice Phone:** | **Fax Phone:** |
|       |       |       |       |
| **General Contractor:** | **Address:** | **City, State & Zip** |
|       |       |       |
| **Contact Person:** | **eMail address:** | **Voice Phone:** | **Fax Phone:** |
|       |       |       |       |
| **AGC Specialty Contractor:** | **Address:** | **City, State & Zip** |
|       |       |       |
| **Contact Person:** | **eMail address:** | **Voice Phone:** | **Fax Phone:** |
|       |       |       |       |
| **Specialty Contractor:** | **Address:** | **City, State & Zip** |
|       |       |       |
| **Contact Person:** | **eMail address:** | **Voice Phone:** | **Fax Phone:** |
|       |       |       |       |
| **Material Supplier:** | **Address:** | **City, State & Zip** |
|       |       |       |
| **Contact Person:** | **eMail address:** | **Voice Phone:** | **Fax Phone:** |
|       |       |       |       |

**Design Professionals & Financial Institutions**

|  |  |  |
| --- | --- | --- |
| **Architect or Engineer:** | **Address:** | **City, State & Zip** |
|       |       |       |
| **Contact Person:** | **eMail address:** | **Voice Phone:** | **Fax Phone:** |
|       |       |       |       |
| **Project Owner:** | **Address:** | **City, State & Zip** |
|       |       |       |
| **Contact Person:** | **eMail address:** | **Voice Phone:** | **Fax Phone:** |
|       |       |       |       |
| **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 Central Texas AGC (**CentexAGC**)

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(NOTE: Application cannot be considered until the references have been received.)**

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SUBCONTRACTORS: List jobs in progress with location/type work/architect/General Contractor/% complete.

SUBCONTRACTORS: List jobs completed in the last three (3) years with location/type work/ architect/ General Contractor.

Has this firm or its principals ever had to declare bankruptcy? [ ]  Yes or [ ]  No?

Have the principals of this firm ever been associated with a firm that has had to file bankruptcy? [ ]  Yes or [ ]  No?

If yes, provide brief explanation of relationship with that firm.

I (We) hereby make application for Associate Membership in the Central Texas Chapter AGC on the basis of the foregoing statements and refer to the persons names above who are personally acquainted with my (our) company and its work and services.

I (We) certify the foregoing statements are correct and agree, if elected, that I (we) will be governed by the Constitution and By-Laws of the Association as long as I (we) continue as a member.

I (We) furthermore agree to promote the objectives of the Association so far as it shall be within my (our) power.

**Nominated by:** (If Applicable) **Applicant Form:**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AGC General Contractor or Associate Member Title:

**Approved by Membership Committee** **Elected to Membership**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_

(Chairman)

**Associate Membership carries the following fees and dues, payable in advance (Nat’l & State Associate Membership dues included):**

 Initiation Fee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Annual Central Texas Chapter Dues: \_\_\_\_\_\_\_\_\_\_\_\_

**Check for a total of $\_\_\_\_\_\_\_\_\_\_\_\_\_, representing $ \_\_\_\_\_\_\_\_\_\_\_\_\_ initiation fee and $ \_\_\_\_\_\_\_\_\_\_\_\_\_ for first year’s dues, must be attached to this application.**

**(Dues cover Central Texas AGC, Texas Building Branch AGC, and AGC of America membership.)**



The Associated General Contractors of America

2300 Wilson Boulevard, Suite 400, Arlington, VA 22201\* 703-548-3118 \* 703-837-5406

National Membership Application and Member Update Form

**Chapter Name:** **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 Contractor** **[ ]  Prov Member** **[ ]  Non-Home** **[ ]  Specialty Contr** **[ ]  Svc/Supplr/Mfr**

Company Name:

Contact Person:       Title:

Officers/Title(s):

Street Address:

City:       State:       Zip:

Phone:       Fax:

eMail Address:       Website:

***~ 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 Provider/Supplier/Manufacturer

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*

*Central Texas AGC Plan Room at 254.772.5400*

**Associate Member Dues Structure**

 Associate Members dues are as follows:

 (1) A one time initiation fee of $50.00, and

 (2) Annual membership dues to the **CentexAGC**, based upon your most recent fiscal year, please circle the appropriate amount below, and include that payment in your membership application. If you have a commercial and residential division, please estimate your last year *commercial* revenues for all your locations within our eight (Bell, Bosque, Coryell, Falls, Hamilton, Hill, Limestone and McLennan) county Central Texas jurisdiction.

|  |  |
| --- | --- |
| $680 | Specialty Contractor or Supplier with gross commercial sales of less than $1,000,000 during your most recent fiscal year. (First year members also) |
| $785 | Specialty Contractor or Supplier with gross commercial sales of more than $1,000,000 and less than $3,000,000 during your most recent fiscal year. |
| $890 | Specialty Contractor or Supplier with gross commercial sales of more than $3,000,000 and less than $5,000,000 during your most recent fiscal year. |
| $995 | Specialty Contractor or Supplier with gross commercial sales of more than $5,000,000 during your most recent fiscal year. |
| $525 | Service provider, Accountant, Banker, Insurance, etc |

 The following items are enclosed and activities will take place:

1. The application for membership, enclosed, should be returned promptly, together with a check for the full first years dues. (Dues will be prorated the second year.)
2. The references you provide will be queried, and their replies together with your application will be reviewed by the Membership Committee. They will present your credentials along with their recommendation to the Board of Directors, comprised of the General Contractor Members of the Chapter.
3. You will be advised of the Board's decision regarding your application as soon as possible. Your check will be held in abeyance until their decision is finalized. Should your application not be accepted, your check will be returned.

 Each week, we will provide you with the most up-to-date project information available. Enclosed in this membership packet is a current **CentexAGC** *News* and several descriptive items about our Chapter. You may also wish to visit websites at the locals, state or national level: [www.CentexAGC.org,](http://www.CentexAGC.org) [www.agctbb.org](http://www.agctbb.org) or [www.agc.org](http://www.agc.org) .

With our ever-popular CompGroup AGC safety group, Safety Director services, and our low cost Internet Plan Room (IPR) through GradeBeam.com, we feel that we have quite a number of meaningful reasons to join.

 Thanks again for your interest in joining AGC. If you have additional questions, *please* do not hesitate to call me directly at 254.772.5400 so we can discuss any questions you might have. Thanks again for your interest, we look forward to working with you!

Best Regards,

K. Paul Holt

President/CEO