



# APPLICATION FOR CONTRACTOR MEMBERSHIP

*"Best People, Best Practices"*

NAME \_\_\_\_\_ COMPANY NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_ FAX \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ EMAIL \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

STATE CONTRACTORS LICENSE NO. \_\_\_\_\_

CLASSIFICATION(S) \_\_\_\_\_ DATE OF ISSUANCE \_\_\_\_\_

I, the undersigned, do hereby certify I am a duly licensed State Contractor in Sacramento CA, and do hereby make application to become a member of the Plumbing-Heating-Cooling Contractors of the Sacramento Valley, Inc. Attached is my check for the initiation fee, as required in the By-Laws of said Association.

Signed \_\_\_\_\_

**Annual Dues: \$2358.00 / \$1269 - 50% for 1st time members (minus Free Enterprise)**

Breakdown of Dues: \$180.00 Free Enterprise Coverage; \$984.00 Local Dues; \$666 State Dues; \$528 National Dues

*Payment for the Annual dues, as required by the By-Laws of said Association:*

Check enclosed

CC# \_\_\_\_\_ CVC: \_\_\_\_\_ Exp: \_\_\_\_/\_\_\_\_

Name on Card: \_\_\_\_\_ Billing Address: \_\_\_\_\_

Please send an invoice

Recommended to the PHCC of SV by: \_\_\_\_\_

**For office use only:**

Date Application Taken : \_\_\_\_\_ Date Referred to Board: \_\_\_\_\_ Executive Director-initials: \_\_\_\_\_

Date Referred to General Membership: \_\_\_\_\_ Date Initiated : \_\_\_\_\_ Executive Director-initials: \_\_\_\_\_