



APPLICATION FOR MEMBERSHIP

COMPANY: _____ DATE: _____

CONTACT: _____ TITLE: _____

MAILING ADDRESS: _____ PHONE: _____

_____ FAX: _____

CITY, STATE, ZIP: _____

EMAIL: _____ WEBSITE: _____

TYPE OF BUSINESS: Corporation _____ MEMBERSHIP CLASS: Builder _____
Partnership _____ (See Requirements) Associate _____
Sole-Proprietorship _____ Probationary Builder _____

FEDERAL I.D. # _____ SOCIAL SECURITY # _____
(For Corporation) (For Partnership & Sole Proprietor)

PA HIC Registration Number: _____ Registration Date: _____

YEARS IN BUSINESS USING CURRENT NAME: _____

HAS THERE BEEN A CHANGE IN OWNERSHIP IN THE LAST TWO YEARS? _____ YES _____ NO

BANK REFERENCES: _____
(Three Required for all applicants)

(Must include account number and
Branch Location)

COMPLETED JOB REFERENCES: _____
(Three required for all builders, remodelers,
& others who provide services to retail
consumers)

(Must provide name, address & phone number)

I agree to abide by the constitution and By-Laws of the Blair/Bedford Builders Association, the Pennsylvania Builders Association and the National Association of Home Builders of the United States with which it is affiliated. Submission of this application does not guarantee acceptance by the association and/or participation in any association sponsored benefits program. A remittance of **\$465.00** representing my annual membership dues in the affiliated Association accompanies this application.

Everything I have stated in this application is correct to the best of my knowledge. The Blair/Bedford Builders Association is hereby authorized to make whatever inquires it deems necessary in connection with the application.

Sponsored By: _____ (Signature of Applicant)
Name of BBBA Member Date: _____

Return this Application To: Blair/Bedford Builders Association
1410 Allegheny Street
Hollidaysburg PA 16648

1410 Allegheny Street, Hollidaysburg, PA 16648 • (814) 693-9710 phone • (814) 693-9712 fax:
email: info@blairbedfordbuilders.com



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