

Application For Membership

General Contractor

Firm name (as listed w/ licensing board)

General contractor licenses NC/SC # _____

_____ Year established _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____

Alternate phone _____

Fax _____

Shipping address _____

City _____ State _____ Zip _____

Company web site address _____

Who at your firm is the designated primary contact with Carolinas AGC?

Name _____

Title _____

E-mail _____

Head of company (if different from above) as you want listed in the *Membership Roster*

Name _____ Title _____

E-mail _____

Type of general contracting work (fill in percentage)

Building: _____% Utility: _____% Highway-Heavy: _____%

General Contracting experience categories (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Commercial offices | <input type="checkbox"/> Manufacturing/Industrial |
| <input type="checkbox"/> Sports & entertainment | <input type="checkbox"/> Environmental/HazMat |
| <input type="checkbox"/> Multi-unit residential | <input type="checkbox"/> Streets & minor roads |
| <input type="checkbox"/> Health care | <input type="checkbox"/> Airports |
| <input type="checkbox"/> Retail | <input type="checkbox"/> Marine & port facilities |
| <input type="checkbox"/> Hotels & convention centers | <input type="checkbox"/> Bridges |
| <input type="checkbox"/> Distribution & warehouses | <input type="checkbox"/> Tunnels/other structures |
| <input type="checkbox"/> Religious & cultural | <input type="checkbox"/> Mass transit |
| <input type="checkbox"/> Education | <input type="checkbox"/> Utility – Line (water-sewer) |
| <input type="checkbox"/> Parks & Recreation | <input type="checkbox"/> Utility – Plant |
| <input type="checkbox"/> Military | <input type="checkbox"/> Telecommunications/cable |
| <input type="checkbox"/> Correctional facilities | <input type="checkbox"/> Energy Distribution/Transmission |
| <input type="checkbox"/> Government (federal, state, local) | <input type="checkbox"/> Dams and reservoirs |

REFERENCES (firms you have done business with – preferably Carolinas AGC member firms)

1. Firm Name _____
 Contact _____
 Mailing address _____
 City _____ State _____ Zip _____

2. Firm Name _____
 Contact _____
 Mailing address _____
 City _____ State _____ Zip _____

Member who suggested you join:

CAGC DUES & MEMBERSHIP TERMS (see chart at right)

Based on the GCR of \$ _____ for last year,
 our annual dues will be \$ _____

MEMBERSHIP DUES (includes IBuild project leads)
 Full annual dues \$ _____
 or
 Quarterly dues
 (first 2 quarters must accompany application) \$ _____

***OPTIONAL PLANS ONLINE: Also enclosed is first year's subscription to IBuildPlus plans online for my main office location** (for info on IBuildPlus, including fees for additional locations, call 704/372-1450) \$ 1,495*

TOTAL \$ _____

Check enclosed

Charge to my: VISA Mastercard Discover AmExpress

Card number: _____ - _____ - _____

Vcode: _____ Expiration date: _____

Name on card: _____

Members of CAGC are automatically members of AGC of America. Membership is pre-paid in full for your first year. In your second year, your partial dues will be prorated to October 1 (our fiscal year). Thereafter, dues will be billed in total for each year on October 1.

It is not the policy of Carolinas AGC to automatically terminate memberships. Accordingly, it is the responsibility of the member to inform us if you do not intend to renew.

This firm agrees: to accept the obligations as well as privileges of membership; that it will be governed by the Articles of Incorporation and Bylaws, Rules & Regulations and fee schedule of The Associated General Contractors of America, Inc. and the Carolinas AGC, Inc.

I consent for my company to receive communications sent by or on behalf of Carolinas AGC via mail, e-mail, phone or fax.

Signature _____
 Title _____ Date _____

Your membership dues to Carolinas AGC are deductible expenses for federal income Tax purposes as ordinary and necessary business expense according to IRS Code Section 162(e). Contributions or gifts to Carolinas AGC are not deductible as charitable contributions for Federal income Tax purposes. An amount equal to 7% of dues is allocable to lobbying activities conducted by the Association on behalf of its members. Members are not allowed a deduction for Federal Income Tax purposes for this portion of their dues.

General Contractor Membership Types

Regular Members are licensed general contractors who submit bids directly to owners. All contractors who submit bids to owners must join Carolinas AGC as regular members.

Provisional Members are licensed general contractors with less than two years' experience in the industry. Firms get a price break and may use the provisional designation for one year. Simply deduct \$200 from the annual flat fee.

Non-Home Members are licensed general contractors who have their business headquarters in another state and who are members of AGC through that home base.

All General Contractor members, regardless of membership type, benefit from on-staff experts as well as products and services offered specifically to meet the needs of firms specializing in Building, Highway-Heavy or Utility construction.

Gross Construction Receipts (GCR) includes:

- All private and public construction work, whether negotiated or competitively bid, including work done by wholly owned subsidiaries who are not regular members.
- Percentage of participation in joint ventures. Work performed as a subcontractor.

Gross Construction Receipts (GCR) excludes:

- Work done on a facility owned by the member firm, parent or subsidiary.
- Work performed outside the Carolinas and reported to another AGC Chapter.
- Jobs subcontracted to another regular member.

GCR Volume Range	Annual Dues
\$0 - 499,999	\$1,400
5 - 999,999	1,800
1 - 1,999,999	2,750
2 - 2,999,999	3,700
3 - 3,999,999	4,650
4 - 4,999,999	5,600
5 - 5,999,999	5,860
6 - 6,999,999	6,300
7 - 7,999,999	6,650
8 - 8,999,999	7,000
9 - 9,999,999	7,350
10 - 10,999,999	7,700
11 - 11,999,999	8,050
12 - 12,999,999	8,400
13 - 13,999,999	8,750
14 - 14,999,999	9,100
15 - 15,999,999	9,325
16 - 16,999,999	9,400
17 - 17,999,999	9,700
18 - 18,999,999	10,000
19 - 19,999,999	10,300
20 - 20,999,999	10,600
21 - 21,999,999	11,200
22 - 22,999,999	11,500
23 - 23,999,999	11,800
24 - 24,999,999	12,100
25 - 29,999,999	12,850
30 - 34,999,999	13,800
35 - 39,999,999	14,350
40 - 44,999,999	15,100
45,000,000 +	15,650

NATURE OF BUSINESS/KEYWORDS In addition to the categories checked on the cover, are there any supplemental descriptive keywords for your firm's work, for use on the *Member Search* area of the Carolinas AGC web site? (Note: this search is limited to 35 words.)

Do you also perform any other types of specialty or subcontract work? If so please explain:

Markets served (check all that apply)

- | | |
|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> All NC | <input type="checkbox"/> All SC |
| <input type="checkbox"/> Triangle | <input type="checkbox"/> Coastal SC |
| <input type="checkbox"/> Sand Hills | <input type="checkbox"/> Eastern NC |
| <input type="checkbox"/> Triad | <input type="checkbox"/> Lowcountry |
| <input type="checkbox"/> Cape Fear | <input type="checkbox"/> Pee Dee |
| <input type="checkbox"/> Western | <input type="checkbox"/> Upstate |
| | <input type="checkbox"/> Central SC |

Other States:

- | | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> VA | <input type="checkbox"/> GA | <input type="checkbox"/> TN |
| <input type="checkbox"/> AL | <input type="checkbox"/> FL | |

Value of company's largest project \$ _____

Number of employees _____

Your firm's labor policy?

- Open shop Collective bargaining Both

Is your firm minority-owned? (MBE/DBE/WBE) Yes No

if yes: members are showcased at www.cagc.org. Because "Minority Ownership" is one search criteria used by your clients, you may provide the following:

State projects

- | | |
|---|---|
| <input type="checkbox"/> African American | <input type="checkbox"/> Asian/Pacific |
| <input type="checkbox"/> Hispanic | <input type="checkbox"/> Native American |
| <input type="checkbox"/> Women/WBE | <input type="checkbox"/> Small Bus. (SC only) |

Federal projects

- DBE SBE
 Disabled Veteran-Owned Business

Help your staff learn and succeed by helping AGC provide the right information to the right people. Please list all individuals to receive general industry information and topical information on:

Safety

Name _____ Title _____

E-mail _____

Include name in printed *Membership Roster*?

- Yes No

Business Development

Name _____ Title _____

E-mail _____

Include name in printed *Membership Roster*?

- Yes No

Human Resources

Name _____ Title _____

E-mail _____

Include name in printed *Membership Roster*?

- Yes No

Training/Education

Name _____ Title _____

E-mail _____

Include name in printed *Membership Roster*?

- Yes No

Estimating

Name _____ Title _____

E-mail _____

Include name in printed *Membership Roster*?

- Yes No

Technology

Name _____ Title _____

E-mail _____

Include name in printed *Membership Roster*?

- Yes No

Project Management

Name _____ Title _____

E-mail _____

Include name in printed *Membership Roster*?

- Yes No

Other Key Contact

Name _____ Title _____

E-mail _____

Include name in printed *Membership Roster*?

- Yes No

BRANCH OFFICES

City _____
Contact _____
Title _____
E-mail _____
Address _____

Phone _____ Fax _____

City _____
Contact _____
Title _____
E-mail _____
Address _____

Phone _____ Fax _____

City _____
Contact _____
Title _____
E-mail _____
Address _____

Phone _____ Fax _____

City _____
Contact _____
Title _____
E-mail _____
Address _____

Phone _____ Fax _____

- List branch offices on www.cagc.org – FREE
- List branch offices in annually printed *CAGC Membership Roster* – \$30 per branch listing

Remit with payment to:
PO Box 30277 Charlotte, NC 28230-0277 Fax 704/332-5032



AGC Approval	
_____	_____
President & CEO	Date
_____	_____
Membership Dept.	Date