

# APPLICATION FOR MEMBERSHIP



**Class of Membership for which this application is being submitted:**

☐ **Contractor**      ☐ **Visiting Contractor**      ☐ **Specialty Contractor**      ☐ **Associate**

\_\_\_\_\_  
Firm Name

\_\_\_\_\_  
Main Contact Person

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Area Code/Phone Number

\_\_\_\_\_  
Area Code/Fax Number

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
Website Address

Names of Owners, Partners, or Officers of Corporation:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Person authorized to represent the firm in chapter affairs/  
national association affairs:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## **General/Visiting/Specialty Contractor Applicants Complete the Following:**

Type of contracting performed. Please check all that apply and **circle** your primary classification:

☐ Building      ☐ Highway      ☐ Heavy Industrial      ☐ Municipal Utilities      ☐ Ready Mix

Building Contractors: What percentage of your business is Design/Build? \_\_\_\_\_% Bid? \_\_\_\_\_% Negotiated? \_\_\_\_\_%

Please give a brief description of the type of business, the main types of contracting done, the method of contracting, locations, customers, etc: \_\_\_\_\_

What percentage of your firm's business is general contracting? \_\_\_\_\_% Public Works License Number: \_\_\_\_\_

Does your company perform 50% or more of its work at the job site? ☐ Yes      ☐ No

Are you engaged in business activities other than as a construction contractor? ☐ Yes      ☐ No If yes, what percentage? \_\_\_\_\_%

Please describe. Use separate page is needed. \_\_\_\_\_

What percentage of your firm's total business is in Montana? \_\_\_\_\_

Does your firm operate open shop (without collective bargaining agreements)? ☐ All work      ☐ Some work      ☐ No work

Does your firm do DAVIS BACON work? ☐ Yes      ☐ No      What percentage of total work? \_\_\_\_\_%

Estimated average dollar volume based on the last three years: \_\_\_\_\_

Number of employees: peak \_\_\_\_\_ least \_\_\_\_\_      Number of years in business? \_\_\_\_\_

**Over ►**

# MEMBERSHIP APPLICATION (CONT.)



## Associate Applicants Complete the Following:

Type of materials and/or services you provide in the construction industry: \_\_\_\_\_  
\_\_\_\_\_

Does your company do any construction Contracting? ☐ Yes ☐ No If yes, what percentage? \_\_\_\_\_%

## All Applicants MUST Complete the Following:

Name of person to whom mail should be addressed: \_\_\_\_\_

Has your company ever been an AGC member? ☐ Yes ☐ No

If yes, please give name(s) of Chapter(s) or Branch(es) and date(s) of membership and name(s) under which formerly enrolled: \_\_\_\_\_

## For Specialty Contractors or Service/Supplier Only:

What is your Specialization code (NAIC or CSI)? - Please see Primary Business Classification page. \_\_\_\_\_

### Please answer the following important questions:

How did you hear about the MCA? \_\_\_\_\_

Reason for joining the MCA? (insurance, plans room, networking, safety services, etc.) \_\_\_\_\_  
\_\_\_\_\_

This firm certifies that the foregoing statements are correct and true, and we agree that if elected to membership, we also will accept the obligations of membership (including providing documentation of gross sales, if requested); that we will be governed by the Articles of Incorporation and the Bylaws of the Associated General Contractors of America and also by the Rules and Regulations and Dues Schedule of the Montana Contractor's Association, Inc. as long as we remain a member, and we furthermore agree to promote the objectives of the Association.

**This firm understands that Contractor membership in the MCA does not guarantee admission to the MCA health, pension, or workers' compensation insurance programs.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

Enclosed is a check for \$ \_\_\_\_\_

Date: \_\_\_\_\_

Please submit completed and signed application, including the appropriate payment (see MCA Member Dues page) to:  
**Montana Contractors' Association, 1717 11th Ave., Helena, MT 59601**

Your membership dues to the Montana Contractors' Association are deductible expenses for Federal income tax purposes as ordinary and necessary expense according to the IRS Code Section 162(e). Contributions or gifts to the Montana Contractors' Association are not deductible as charitable contributions for Federal income tax purposes.