

LCCA@LCCA.NET
P: 360.425.8820
F: 360.425.6609
PO Box 2306
1015C VANDERCOOK WAY
LONGVIEW, WA 98632

LOWER COLUMBIA CONTRACTORS ASSOCIATION

MEMBERSHIP APPLICATION

Name _____ Phone (____) _____
Company Name _____ Fax (____) _____
Address _____ Cell _____
City _____ State _____ Zip _____ E-mail _____
Number of Employees _____ Website _____
Minority Owned Business? ____ Yes ____ No Contractors Registration _____
Woman Owned Business? ____ Yes ____ No Referred By _____
List (3) areas of primary services:

Signature _____ Date _____

CHOOSE ONE MEMBERSHIP TYPE

BUILDER \$525

Builder Members are developers, single or multi-family home builders, home remodelers, commercial or general contractors, and labor-based sub-contractors

ASSOCIATE \$525

Associate members are suppliers, real estate, financial, and other companies that provide goods or services to the homebuilding industry

Plan Center \$350 (LCCA Member)

Plan Center Members have access to plans and resource materials. In addition, weekly updates notify members plans are available for viewing. Blueprint copies available onsite during regular business hours for an additional fee. Must have current LCCA Membership to join.

CONTRIBUTIONS

LCCA Scholarship Fund **\$25**
 LCCA Political Action Committee **\$25**

Check Credit Card# _____
Cardholder Name _____

Exp Date _____ Total Amount Due _____
Authorized Signature _____

Optional Monthly Payment Plan • Authorization For Automatic Billing

This agreement binds the payer to one full year of membership dues paid in 12 monthly installments. Yearly dues paid in monthly installments will continue thereafter until written notice of membership cancellation by the members. The payer may also choose to change their method of payment to one annual payment.

Name _____ Company Name _____

Payee: Lower Columbia Contractors Association (LCCA)

Payment Method: ACH (Payment will automatically be withdrawn from your account each month. Please attach a voided check.)

Credit Card _____ Cardholder Name _____ Exp Date _____

The undersigned hereby makes an initial payment of \$272 (initial dues for BIAW and NAHB) and agrees to pay \$45 each month for annual membership dues in 12 equal, consecutive monthly installments plus an annual fee of \$3.00. The undersigned hereby authorizes Lower Columbia Contractors Association (LCCA), or its assigns, to initiate and make debit entries to the account indicated. Withdrawals will be made on the 10th of each month and will commence the monthly following receipt of this agreement for payment to Payee of all amounts owed by the undersigned pursuant to the contract referenced above, for LCCA membership. An authorized signor on the Company's checking/savings/credit card account indicated below must execute this Authorization Agreement. In the event funds are not available in the bank account noted above on the day payments is due, LCCA, or its assigns, will attempt to draft again within three (3) business days. A fee of \$25 will be assessed to the account(s) for each transaction for which funds are not available.

Authorized Signature _____ Date _____

By signing, I hereby agree to the terms of the monthly payment plan and remain obligated to pay the full amount of the annual membership dues.

BUILDING OUR FUTURE TOGETHER