



AUTHORIZATION TO RELEASE INFORMATION

The undersigned does hereby authorize BLAIR-BEDFORD BUILDERS ASSOCIATION to verify its past and present employment, earning, bank accounts, stock holdings, and any other asset balances that are needed to process the undersigned's application for membership with the BLAIR-BEDFORD BUILDERS ASSOCIATION.

The undersigned further authorized the BLAIR-BEDFORD BUILDERS ASSOCIATION to obtain a consumer credit report and verify other credit information, including all past and present liabilities. It is understood that a photocopy or faxed copy of this form will also serve as authorization.

The information that the BLAIR-BEDFORD BUILDERS ASSOCIATION obtains is only to be used in the processing of the undersigned's application for membership with the BLAIR-BEDFORD BUILDERS ASSOCIATION and for other purposes.

Applicant name (please print clearly)

Applicant signature

Date: _____ Social Security Number: _____ - _____ - _____

Applicant name (please print clearly)

Applicant signature

Date: _____ Social Security Number: _____ - _____ - _____

- I have enclosed a check in the amount of \$25 (application fee)
- I have enclosed a check in the amount of \$425 representing my annual membership dues in the affiliated Association (submission of application does not guarantee acceptance to the association and or participation in any association benefits programs).

1410 Allegheny Street, Hollidaysburg, PA 16648 (814-693-9710) Fax (814-693-9712)
E-mail: info@blairbedfordbuilders.com www.blairbedfordbuilders.com



APPLICATION FOR MEMBERSHIP

COMPANY: _____ DATE: _____
CONTACT: _____ TITLE: _____
MAILING ADDRESS: _____ PHONE: _____
_____ FAX: _____
CITY, STATE, ZIP: _____ EMAIL: _____

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 Proprietors)

PA HIC REGISTRATION # _____ REGISTRATION DATE _____

YEARS IN BUSINESS USING CURRENT NAME: _____

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

BANK/CREDIT 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 _____

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 \$425.00 representing my annual membership dues in the affiliated Association accompanies this application, along with a separate check for \$25 which is a non-refundable application fee.

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 inquiries it deems necessary in connection with the application.

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

Return This Application To: _____ Date: _____

Blair/Bedford Builders Association
1410 Allegheny Street
Hollidaysburg, PA 16648