



WEST TEXAS CHAPTER AGC, INC.

Skill, Integrity, Responsibility

Date: **General Contractor Membership Application**

Member Information

Company Name:

Mailing Address:

Street Address:

City/State:

Zip:

City/State:

Zip:

Phone:

Cell:

Fax:

Website

Principal contact person receiving West Texas AGC Chapter notifications:

Principal's - contact email:

Accounting email if different:

Email contact(s) for weekly Newsletter and Daily Updates:

Email contact(s) for internet plan room invitations and notices:

Company Background

Date company established as a General Contractor firm under this name:

Has the Company been an AGC Member before: Yes No
If Yes, list year and under what name and Chapter:

of persons in the firm:

Indicate if your company is registered with State or Federal:

Of these: # of field employees:

- SBE (Small Business Enterprise)
- WBE (Women-Owned Business)
- MBE (Minority Business Enterprise)
- LBE (Large Business Enterprise)

List type and scope of work the firm specializes in or services provided by your company:

Classification

CSI Code

Primary:

Alternate:

Alternate:

Has this company or a company you were a principal in failed to complete a contract awarded to them? Yes No

Has this company or a company you were a principal in ever been found guilty in a lawsuit by an owner or architect for fraudulent practices: Yes No

Company is a Corporation LLC Partnership Sole Proprietorship

Principal Officers

Name

Title

of Years with Company

Reference and Documents (support documentation required noted in red)					
A. Complete the following information and if (yes) PROVIDE COPIES OF CURRENT COMPANY CERTIFICATE OF INSURANCE:					
	Yes	No	Agency	Agent	Phone/or/Email
General Liability					
Workers Compensation					
Bonding – current capacity: \$					
B. PROVIDE A MINIMUM OF THREE (3) REFERENCES FROM DESIGN PROFESSIONALS/ARCHITECTS AND/OR ENGINEERS; PROVIDE A MINIMUM OF THREE (3) REFERENCES INCLUDING SUB-CONTRACTORS AND CUSTOMERS. Letters may be provided.					
Company Name	Type of Ref	Contact Person	Phone	Email	
C. PROVIDE A PROJECT LIST OF WORK performed as a General Contractor: including current work and <i>work performed the previous two years</i> including name of project, location, date of construction and contract amount. <u>For a minimum of ten projects include:</u> owner, architect/engineer and major sub-contractors. AIA pre-qualification form acceptable.					
Acknowledgements					
I, on behalf of the company, certify the statements are correct and true and agree, if approved, will follow the Constitution and By-Laws of the West Texas Chapter AGC (Association) and AGC of America as long as I (we) continue as a member.					
Company:					
Name:			Title:		
Signature:			Date:		
Board Review			Date:		
Approved <input type="checkbox"/> Denied <input type="checkbox"/> Tabled <input type="checkbox"/>			Comments:		

Please Return completed application by mail or email to West Texas Chapter AGC, Inc.

Attn: Cassie Hughes, Executive Director

P. O. Box 5365 Abilene, TX 79608

chughes@wtagc.org P: (325) 676-7447

ALL General Contractor applications require approval by the West Texas AGC Chapter Board of Directors.

Minimum fee is \$3,300 when value of work is \$2 Million or less.

Evaluations are scored non-subjectively based on the documents provided. A minimum score of 80 is required for approval.

WEST TEXAS CHAPTER AGC PLAN ROOMS

Abilene – Corporate Office	Lubbock	Midland	Wichita Falls
3125 S. 27 th St./P.O. Box 5365 Abilene, TX 79605/79608 325/676-7447 wtagc@sbcglobal.net	3004 B 50 th St. Lubbock, TX 79413 806/797-8898 lubbock@wtagc.org	4500 W. Illinois Suite 201 Midland, TX 79703 432/520-2220 midland@wtagc.org	2014 Kell W. Blvd. Suite C Wichita Falls, TX 76301 940/322-0100 wichitafalls@wtagc.org
FAX 325/676-7119 wtagc.org			