



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

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

3125 S. 27th St., Abilene, TX 79605

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. Abilene, TX 79605 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

wtagc.org