

## Lakeland Builders Association Membership Application





Type of Member- Check the membership you are applying for. Builder—\$675 (Must be actively building and/or remodeling housing units or land development. Must provide proof of current contractor certification as required by the State of Wisconsin.) Associate—\$675 (Any firm that provides products or services to builders. Must be engaged in a building related trade.) Affiliate—\$275 (Any Employee of a Builder or Associate member company) Name: \_\_\_\_\_ Please print clearly. Company Name: Location: City ST Zip Billing: \_\_\_\_\_ City \_\_\_\_ ST \_\_\_ Zip \_\_\_ Phone: Mobile \_\_\_\_\_ Email: Website: \_\_\_\_\_ Individual who will be/is Member of Record: Title: (This person will be the contact listed in the directory & on the website and all Mailings & Publications will be addressed to him/her.) Company Name under which you are licensed, Number of Years in Business: if different than above: I understand that by providing my email address above, on behalf of the company/organization specified above, I am authorized to and herby consent for the company/organization to receive emails sent by or on behalf of Lakeland Builders Association (LBA), Wisconsin Builders Association (WBA) and National Association of Home Builders (NAHB). I agree to abide by the bylaws, policies, and rules of the local association to which this membership is directed as well as Wisconsin Builders Association (WBA) and the National Association of Home Builders (NAHB) of the United States with which it is affiliated. I UNDERSTAND THAT A CERTIFICATE OF LIABILITY INSURANCE (suggested limits of at least \$1,000,000 per occurrence and \$2,000,000 aggregate) IS REQUIRED IN ORDER FOR MEMBERSHIP TO BE CONSIDERED. LBA is to be named as the "Certificate Holder" and name of Insured must match the above Company name. Applicant's Signature\_\_\_\_\_Date \_\_\_\_\_ For all Membership types. (Credit is given to the member who encouraged you to become a member.)

Once we receive your application, payment, and certificate of insurance, your membership will be up for approval at the next

Payment type accepted: Cash, Check or Credit Card (call office with credit card information)

monthly Board of Directors meeting.

<u>Title of Member Applying</u> : (Required)		NAHB ASSOCIATE Member Classification (Number up to 3
1 President/CEO		in order of importance of business activity. Choose from L-V5.)
2 VP/General Manager		L Accounting
3 Construction Superintendent		M1 Architecture
4 Sales & Marketing Director/Manager		M2 Engineering
5 Architect, Designer or Engineer		M3 Planner or Designer
6 Financial Manager/Director		N Legal Services
7 Owner, Principal, Partner		O Computer Products and Services
9 Other (specify)		P1 Commercial Banking/Thrift Institution
		P2 Mortgage Banking
Number of Employees in Firm:		Q Insurance or Title Company
		R Marketing, Advertising or Public Relations
NAHB BUILDER Member Classifications (Number up to 3 in		S Building Material Manufacturing
order of importance of business activity. Choose from A-K.)		T Property Management
A Single Family Spec/Tract Building		U Real Estate
B1 Single Family General Contracting		Y Utilities
B2 Single Family Custom Building		Y2 Industry Consultant
C Multifamily Building (Condo/Coop Units)		Y3 Trade Association/Non-Profit
D Multifamily Bldg./Ownership (Rental Units)		Z Other (please specify)
E Multifamily General Contracting		Wholesale Dealers/Distributors
F Remodeling - Residential		
G Remodeling - Commercial		X1 Appliances
H Commercial Building (own account)		X2 Building Materials/Lumber
Commercial General Contracting		X3 Floor Coverings
J Land Development		X4 Paint/Wall Coverings
K Manufacturing of Modular/Panelized/Log		X5 Other Wholesale Dealership (specify)
indirecteding of mode	mar/r arionzoa/zog	Subcontractors and Specialty Trade Contractors
Dollar Volume per Year	Neverland Chaire and Vern	W1 Carpentry
(select one)	Number of Units per Year	W2 Electrical
0 Under \$500,000	(select one)	W3 Masonry. Stone, Tile, Plastering
0 Onder \$300,000	☐1 0 units	W4 Landscaping
□ 1 \$500,000 - \$999,999		W5 Plumbing, Heating, Air Conditioning
2 \$1 million - \$4,999,999	2 1 to 10 units	W6 Roofing, Siding, Sheet Metal
	☐ 3 11 to 25 units	W7 Painting, Paper Hanging
☐ 3 \$5 million - \$9,999,999	□ 4 26 to 100 unito	W8 Floor Laying, Other Floor Work
4 \$10 million or more	☐ 4 26 to 100 units	W9 Concrete Work
_	☐ 5 101 to 500 units	WA Excavation Work
☐ 5 No construction activity	☐ 6 Over 500 units	WC Appliances
EOD I DA.	6 Over 500 units	WD Security Systems
FOR LBA: Please list your WISCONSIN CREDENTIAL numbers		WZ Other Subcontractor (specify)
that apply to you and your		Retailers/Dealers/Distributors
Building Contractor #		☐ V1 Appliances
		☐ V2 Building Materials/Lumber
Dwelling Contractor Credential #		V3 Floor Coverings
		V4 Paint/Wall Coverings
Dwelling Contractor Qualifier Credential #		V5 Other Retail Dealerships (specify)
(Is this held by the individual liste	ed above? If not who?	
	)	
OTHER:		LBA Committees of Interest to Me (For more information on these committees please contact the
OIIILIN		LBA Office.
	_	1 Career Development/Build My Future
		2 Education
		3 Government Affairs/Advocacy
		4 Membership/Public Relations
		<u> </u>
		5 Home Showcase/Parade of Homes
		6 Golf Outing
		☐ 7 Christmas Party & Installation Banquet