



Lakeland Builders Association Membership Application



Type of Member- Check the membership you which you are applying.

- ☐ Builder—\$625 (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—\$625 (Any firm that provides products or services to builders. Must be engaged in a building related trade.)
- ☐ Affiliate—\$225 (Any Employee of a Builder or Associate membercompany)

Name: _____

Please print clearly

Company Name: _____

Address
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.)

Number of Years in Business: _____

**Company Name under which you are licensed,
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 hereby 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 _____

Spike/Sponsor _____ Company _____

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 monthly Board of Directors meeting.

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

(Over - Please complete page 2)

Title of Member Applying: (Required)

- ☐ 1 President/CEO
☐ 2 VP/General Manager
☐ 3 Construction Superintendent
☐ 4 Sales & Marketing Director/Manager
☐ 5 Architect, Designer or Engineer
☐ 6 Financial Manager/Director
☐ 7 Owner, Principal, Partner
☐ 9 Other (specify) _____

Number of Employees in Firm: _____

NAHB Builder Member Classifications (Number up to 3 in order of importance of business activity. Choose from A-K.)

- ☐ A Single Family Spec/Tract Building
☐ B1 Single Family General Contracting
☐ B2 Single Family Custom Building
☐ C Multifamily Building (Condo/Coop Units)
☐ D Multifamily Bldg./Ownership (Rental Units)
☐ E Multifamily General Contracting
☐ F Remodeling - Residential
☐ G Remodeling - Commercial
☐ H Commercial Building (own account)
☐ I Commercial General Contracting
☐ J Land Development
☐ K Manufacturing of Modular/Panelized/Log

Dollar Volume per Year

(select one)

- ☐ 0 Under \$500,000
☐ 1 \$500,000 - \$999,999
☐ 2 \$1 million - \$4,999,999
☐ 3 \$5 million - \$9,999,999
☐ 4 \$10 million or more
☐ 5 No construction activity

Number of Units per Year

(select one)

- ☐ 1 0 units
☐ 2 1 to 10 units
☐ 3 11 to 25 units
☐ 4 26 to 100 units
☐ 5 101 to 500 units
☐ 6 Over 500 units

FOR LBA:

Please list your WISCONSIN CREDENTIAL numbers that apply to you and your business:

Building Contractor # _____

Dwelling Contractor Credential # _____
 (or Business Credential)

Dwelling Contractor Qualifier Credential # _____

(Is this held by the individual listed above? If not who?
 _____)

OTHER: _____

NAHB Associate Member Classification (Number up to 3 in order of importance of business activity. Choose from L-V5.)

- ☐ L Accounting
☐ M1 Architecture
☐ M2 Engineering
☐ M3 Planner or Designer
☐ N Legal Services
☐ O Computer Products and Services
☐ P1 Commercial Banking/Thrift Institution
☐ P2 Mortgage Banking
☐ Q Insurance or Title Company
☐ R Marketing, Advertising or Public Relations
☐ S Building Material Manufacturing
☐ T Property Management
☐ U Real Estate
☐ Y Utilities
☐ Y2 Industry Consultant
☐ Y3 Trade Association/Non-Profit
☐ Z Other (please specify) _____

Wholesale Dealers/Distributors

- ☐ X1 Appliances
☐ X2 Building Materials/Lumber
☐ X3 Floor Coverings
☐ X4 Paint/Wall Coverings
☐ X5 Other Wholesale Dealership (specify) _____

Subcontractors and Specialty Trade Contractors

- ☐ W1 Carpentry
☐ W2 Electrical
☐ W3 Masonry. Stone, Tile, Plastering
☐ W4 Landscaping
☐ W5 Plumbing, Heating, Air Conditioning
☐ W6 Roofing, Siding, Sheet Metal
☐ W7 Painting, Paper Hanging
☐ W8 Floor Laying, Other Floor Work
☐ W9 Concrete Work
☐ WA Excavation Work
☐ WC Appliances
☐ WD Security Systems
☐ WZ Other Subcontractor (specify) _____

Retailers/Dealers/Distributors

- ☐ V1 Appliances
☐ V2 Building Materials/Lumber
☐ V3 Floor Coverings
☐ V4 Paint/Wall Coverings
☐ V5 Other Retail Dealerships (specify) _____

LBA Committees of Interest to Me

(For more information on these committees please contact the LBA Office.)

- ☐ 1 Christmas Party & Installation Banquet
☐ 2 Education
☐ 3 Golf Outing
☐ 4 Governmental Affairs
☐ 5 Career Development/Build My Future
☐ 6 Membership/Public Relations
☐ 7 Home Showcase/Parade of Homes