

CONTRACTOR APPLICATION FOR MEMBERSHIP PLUMBING-HEATING-COOLING CONTRACTORS of NC

Dedicated to the promotion, advancement, education and training of the industry, for the protection of our environment and the health, safety and comfort of society.

“Every man owes part of his time and money to the business or industry in which he is engaged.
No man has a moral right to withhold his support from an organization
that is striving to improve conditions within his sphere.”

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Company Website: _____

Phone: _____ Fax: _____ Email: _____

Licenses Held: _____

Corporate Officers and Titles: _____

ALL APPLICATIONS MUST BE APPROVED BY PHCCNC BOARD OF DIRECTORS. IN ADVANCE OF THE BOARD PASSING UPON THIS APPLICATION FOR MEMBERSHIP, THE APPLICANT AGREES THAT, IF GRANTED MEMBERSHIP, THE APPLICANT, THEIR COMPANY AND EMPLOYEES SHALL:

1. Participate in the activities of this Association to the fullest extent possible.
2. Comply strictly with the laws and regulations as set forth by the Bylaws of this Association.
3. Accept and conscientiously live up to the Standard of Ethics as maintained by this Association in that the industry may continue to be uplifted to a constantly higher standard.
4. Sustain the financial, political, and strategic goals and missions of this Association.

Dues: Contractor Member Annually \$825.00 Semi Annually \$450.00*

Please select your payment plan above.

Signature below indicates commitment to abide by the principles listed above and authorization to process credit card charges.

***Semi-Annual may be made ONLY by credit card.** Credit card charges for membership continue until the Association receives a 30 day written advance notice of any requested change(s). Membership commitments are annual in nature and payment plans are offered as an accommodation for our members.

Select One:

___ VISA Credit Card #: _____ Exp. Date: _____ Security Code: _____

___ MasterCard Name on Card: _____ Cardholder Signature: _____

___ AX Billing Address: : _____ - _____
(street) (city) state (zip)

Office Use Only

Board Action () Approved () Rejected Date ___/___/___ Amount Rec'd \$ _____ PHCC-NA Notified ___/___/___

No dues are deductible as a charitable contribution but may be considered as an ordinary and necessary business expense. However, a portion of PHCC-National and PHCC-NC dues are not deductible as a business expense to the extent that either group engages in lobbying. The non-deductible portion of dues for 2008 is 12%.

Complete applications can be sent to: **PHCC-NC, 5540 McNeely Drive, Suite 202, Raleigh, North Carolina 27612.**