



# An Invitation to Join ABC Connecticut Chapter

**General Information**

Company Name \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_ Web \_\_\_\_\_  
 Year of Incorporation \_\_\_\_\_  
 Preferred Method of Communication (Check One).....  Fax  Email  Mail  
 Include in Directory and Contrator Referral Service .....  Yes  No

**Mailing Address****Street Address**

Address \_\_\_\_\_ Address \_\_\_\_\_  
 \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Company Officers****Phone****E-mail****Residential Zip**

\_\_\_\_\_  
 President/CEO  
 \_\_\_\_\_  
 Vice President  
 \_\_\_\_\_  
 Finance Officer

**Your Representatives to ABC****Title****Phone****E-mail****Residential Zip**

\_\_\_\_\_  
 Primary Contact  
 \_\_\_\_\_  
 Education Contact  
 \_\_\_\_\_  
 Safety Contact  
 \_\_\_\_\_  
 Financial Contact  
 \_\_\_\_\_

\_\_\_\_\_  
 Sponsor Name  
 \_\_\_\_\_  
 Sponsor Company

\_\_\_\_\_  
 Primary Contact Committee Interest

**Choose CSI Codes (see attached sheet)**

Code 1 - CSI Division \_\_\_\_\_ CSI Code \_\_\_\_\_ Description \_\_\_\_\_  
 Code 2 - CSI Division \_\_\_\_\_ CSI Code \_\_\_\_\_ Description \_\_\_\_\_  
 Code 3 - CSI Division \_\_\_\_\_ CSI Code \_\_\_\_\_ Description \_\_\_\_\_

**Company Profile - approx 50 words or less (see enclosed list)****Category (check one)**

- General Contractor  Subcontractor  Supplier  Associate

**Please remit to:**

Associated Builders and Contractors - Connecticut Chapter  
 2138 Silas Deane Highway Suite 101  
 Rocky Hill, CT 06067

www.ctabc.org  
 Phone (860) 529-5886  
 Fax: (860) 529-6778  
 Email: lelah@ctabc.org



**Work Information**

Max Bond \_\_\_\_\_ Single Job Bond \_\_\_\_\_ Average Job Size \_\_\_\_\_ Largest Job Size \_\_\_\_\_  
 Scope of Work  Commercial  Residential  Public  
 # Admin Workers \_\_\_\_\_ # Skilled Workers \_\_\_\_\_  
 Are you a minority business?  Yes  No  
 Are you a member of another Chapter ?  Yes  No  
 If yes, which one(s)? \_\_\_\_\_  
 Do you provide training for your employees?  Yes  No

**Work Regions (check all that apply)**

Local  State  National

**New Member Investment Schedule**

Category	Amount
12 Over \$50,000,000	\$6,071.00
11 \$20,000,000-\$50,000,000	\$5,524.00
10 \$10,000,000-\$20,000,000	\$5,239.00
9 \$5,000,000-\$10,000,000	\$4,380.00
8 \$3,000,000-\$5,000,000	\$3,641.00
7 \$2,000,000-\$3,000,000	\$3,007.00
6 \$1,000,000-\$2,000,000	\$2,445.00
5 \$750,000-\$1,000,000	\$1,972.00
4 \$500,000-\$750,000	\$1,732.00
3 UNDER \$500,000	\$1,379.00
2.B Supplier Over \$1,000,000	\$1,316.00
2.A Supplier Under \$1,000,000	\$1,181.00
1 Associate	\$1,405.00

Application Signed By \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
 My Annual Dues \$ \_\_\_\_\_  
 Credit Card Type \_\_\_\_\_ Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_  
 Name on Card \_\_\_\_\_ Authorized Signature \_\_\_\_\_

**Tax Deductible Information**

ABC dues are not deductible as a charitable contribution for Federal income tax purposes, but may be partially deductible as a business expense. A% of your dues are not deductible because they are related to lobbying activities on behalf of ABC's members.

**Notes**

Providing an e-mail address and signing this application is agreement to receive e-mail communications from CT Chapter of ABC.

As a member of ABC, you will receive notices about member services, products and events which may be sent by email. Some emails may contain solicitations or advertisements about these products and events, and you are assenting to the receipt of such emails but may decline to receive such emails from ABC by emailing lelah@ctabc.org or by contacting ABC at the address on this application.

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