

LIST 3 VERIFIABLE CUSTOMER REFERENCES (ACCOUNTS ACTIVE WITHIN THE LAST 12 MONTHS.)

1. NAME OF CUSTOMER: _____ PHONE NUMBER: _____
MAILING ADDRESS: _____
LOCATION OF HOME/JOB, (IF DIFFERENT): _____
WORK PERFORMED: NEW HOME: _____ RENOVATION: _____ OTHER: _____
2. NAME OF CUSTOMER: _____ PHONE NUMBER: _____
MAILING ADDRESS: _____
LOCATION OF HOME HOME/JOB, (IF DIFFERENT): _____
WORK PERFORMED: NEW HOME: _____ RENOVATION: _____ OTHER: _____
3. NAME OF CUSTOMER: _____ PHONE NUMBER: _____
MAILING ADDRESS: _____
LOCATION OF HOME/JOB, (IF DIFFERENT): _____
WORK PERFORMED: NEW HOME: _____ RENOVATION: _____ OTHER: _____

BUILDER & REMODELER APPLICANTS ONLY: PLEASE SUBMIT TWO (2) CERTIFICATES OF OCCUPANCY OR PERMITS WITH INSPECTIONS COMPLETED. FAILURE TO DO SO WILL REQUIRE AN INSPECTION OF TWO (2) PROJECTS IN PROGRESS (PREFERABLY OPEN FRAME.) PLEASE ATTACH ON SEPARATE SHEET OF PAPER NAME OF THE PROJECT, LOCATION AND DIRECTIONS, AND PROVIDE A SET OF BLUEPRINTS FOR EACH HOUSE.

LIST ANY OTHER ORGANIZATION (S) TO WHICH YOU/YOUR COMPANY CURRENTLY BELONG:

WHY DO YOU WANT TO JOIN THE POCONO BUILDERS ASSOCIATION::

HAVE ANY PRINCIPALS OF THE FIRM OR THEIR SPOUSES BEEN INVOLVED IN A BANKRUPTCY OR HAD THEIR PROFESSIONAL LICENSE REVOKED WITHIN THE LAST 7 YEARS? (EXAMPLE: SERVED ON A BOARD OF A FIRM, WAS A PRINCIPAL IN A FIRM OR FILED PERSONALLY?) YES: _____ NO: _____

IF YES, PLEASE PROVIDE FULL DETAILS ON YOUR LETTERHEAD.

HAVE YOU EVER BEEN SUSPENDED BY ANOTHER ASSOCIATION? Yes _____ No _____

IF YES NAME OF ASSOCIATION _____

REASON FOR SUSPENSION _____

ACKNOWLEDGMENT

I AGREE TO ABIDE BY THE CONSTITUTION, BY-LAWS, CODE OF ETHICS AND ADOPTED BUILDING CODES OF THE POCONO BUILDERS ASSOCIATION. I ALSO AGREE TO ABIDE BY THE BY-LAWS OF THE NATIONAL ASSOCIATION OF HOME BUILDERS AND THE PENNSYLVANIA BUILDERS ASSOCIATION. I AGREE THAT THE INFORMATION I PROVIDED IS TRUE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT FALSEFICATION OF INFORMATION COULD BE GROUNDS FOR IMMEDIATE EXPULSION FROM THE POCONO BUILDERS ASSOCIATION.

AUTHORIZATION

I (WE) AUTHORIZE THE POCONO BUILDERS ASSOCIATION TO MAKE WHATEVER INQUIRIES IT DEEMS NECESSARY, INCLUDING CREDIT REPORTS, IN CONNECTION WITH MY (OUR) APPLICATION. I (WE) AUTHORIZE AND INSTRUCT ANY PERSON, FIRM, CORPORATION OR CONSUMER REPORTING AGENCY TO COMPILE AND FURNISH THE POCONO BUILDERS ASSOCIATION WITH ANY INFORMATION IT MAY HAVE OR OBTAIN IN RESPONSE TO SUCH INQUIRIES.

DATE: _____ APPLICANT SIGNATURE: _____

WITNESS: _____ : APP. NAME (PRINT): _____

SPONSORED BY _____ COMPANY _____

PLEASE SUBMIT A COMPLETED APPLICATION, ALONG WITH YOUR PAYMENT FOR THE MEMBERSHIP FEE, APPLICATION FEE, AND IF APPLICABLE, INSPECTION FEE MADE PAYABLE TO POCONO BUILDERS ASSOCIATION. IN THE EVENT THAT YOUR MEMBERSHIP IS NOT APPROVED, YOUR MEMBERSHIP FEE WILL BE REFUNDED MINUS THE INSPECTION FEE (IF APPLICABLE) AND APPLICATION FEE:

POCONO BUILDERS ASSOCIATION
745 MAIN STREET SUITE 203
STROUDSBURG, PA 18360

BUILDER & REMODELER MEMBERSHIP
MEMBERSHIP \$641.00

Associate Membership
MEMBERSHIP \$541.00

I WOULD LIKE TO PAY BY CREDIT CARD VISA MASTERCARD DISCOVER

Name as it appears on card _____ Amount \$ _____

Address of Cardholder _____ Zip Code _____

Credit Card # _____ Card Security # _____

Exp Date (mm/yy) _____ Signature _____