

# 2012 ABC OF WESTERN PENNSYLVANIA MEMBERSHIP APPLICATION

3500 Spring Garden Avenue, Pittsburgh, PA 15212 Phone: (412) 231-1446 Fax: (412) 231-3201 E-mail: [ewatt@abcwpa.org](mailto:ewatt@abcwpa.org) Website: [www.abcwpa.org](http://www.abcwpa.org)

## Dues Effective September 13, 2011



<u>Category</u>	<u>Annual Dues</u>	
1A	\$478	Affiliate: Flat Annual Fee (Training schools)
1B	\$960	Associate: Flat Annual Fee (Architects, Engineers, Accountants)
2	\$1,039	Supplier: Flat Annual Fee
<b>Contractor/Developer:</b>	<b>Annual Gross Volume</b>	
4	\$1,554	Under \$ 500,000
6	\$2,562	\$ 500,000 - \$ 999,999
7	\$3,417	\$ 1,000,000 - \$ 2,999,999
8	\$4,175	\$ 3,000,000 - \$ 5,999,999
9	\$4,986	\$ 6,000,000 - \$ 9,999,999
10	\$5,793	\$10,000,000 - \$19,999,999
11	\$6,572	\$20,000,000 - \$49,999,999
12	\$8,127	Over \$50,000,000

90% of your dues are tax deductible. "Contributions or gifts made to this association are not deductible as charitable contributions for Federal income tax purposes. However, payments of membership dues are deductible for most members of a trade association under Section 162 of the Internal Revenue Code as an ordinary and necessary business expense."

Note: Effective 12/31/93 the portion of dues used by the association for lobbying is no longer tax deductible. The best estimate, based on national ABC activity, is that 9% of the dues is not tax deductible.

Dues for General and Sub-Contractors are based on the previous year's gross business volume. Applicant designates appropriate category on the honor system. The annual directory will list your firm and volume of business based on your selection. Members of more than one ABC chapter receive credit to avoid duplicate National dues payment.

Company \_\_\_\_\_ Contact Name: \_\_\_\_\_

Company Address: \_\_\_\_\_ Contact Title: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Cell/Mobile Phone: (\_\_\_\_) \_\_\_\_\_

Web Page: \_\_\_\_\_ Secondary Contact: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Secondary Contact: \_\_\_\_\_

Training Supervisor & Title: \_\_\_\_\_ Safety Supervisor & Title: \_\_\_\_\_

\_\_\_\_ **DUES CATEGORY # (Select from above list)** \_\_\_\_ General Contractor \_\_\_\_ Sub Contractor \_\_\_\_ Supplier \_\_\_\_ Associate

Business Description for membership directory: \_\_\_\_\_

Are a multiple chapter member? \_\_\_\_ Yes \_\_\_\_ No. If yes, is your company a current Platinum Level STEP recipient? \_\_\_\_ Yes \_\_\_\_ No

\_\_\_\_ I request to be listed in the printed & online membership directories. \_\_\_\_ I request to NOT be listed in the printed & online membership directories.

Sponsoring ABC Member: \_\_\_\_\_

I hereby apply for membership with ASSOCIATED BUILDERS & CONTRACTORS OF WESTERN PENNSYLVANIA, INC. Enclosed is my payment of annual dues based on my previous year's gross business volume (except for Associate & Supplier members, flat fee). If accepted, I will abide by its by-laws, support its objectives, comply with the Code of Ethics and pay the established dues for the appropriate category. 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 or by contacting ABC at the address on this application.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Please return entire application and check to: ABC of Western PA at 3500 Spring Garden Avenue, Pittsburgh, PA 15212. Each new member application requires a majority vote by the Board of Directors at their next scheduled meeting. In order to be voted on, completed applications and dues payment must be submitted prior to the scheduled meeting.

FOR INTEROFFICE USE

- Member company added to the database Employee initial \_\_\_\_\_
- Individual contacts updated and added to the database Employee initial \_\_\_\_\_
- Individuals added to email distribution list Employee initial \_\_\_\_\_
- Member signatory letter (if required) Employee initial \_\_\_\_\_
- New member packet sent Employee initial \_\_\_\_\_
- Financials rectified Employee initial \_\_\_\_\_

BOARD OF DIRECTORS USE

- Board of Directors vote in favor of membership DATE: \_\_\_\_\_
- Board of Directors vote against membership DATE: \_\_\_\_\_

REASON: \_\_\_\_\_  
\_\_\_\_\_  
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