



760 McGuire Place, Newport News, VA, 23601

Phone 757-595-1600 Fax 757-595-8983

Of the Peninsula Housing & Builders Association

MEMBERSHIP APPLICATION

The following information is required for application and registration in the Peninsula Remodelors Council. All references listed will be contacted and will be kept confidential within the Board of Directors. Note: All companies making application to PRC must be members of the Peninsula Housing & Builders Association. Please verify your membership before submitting this application by contacting PHBA at 595-1600. If you are an associate member, only complete the first seven lines of this page where indicated.

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

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail \_\_\_\_\_

Name and address of the chief executive operating official who will be in charge of/or responsible for operations:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Is the applicant a member in good standing with PHBA? Yes \_\_\_\_\_ No \_\_\_\_\_

Please list memberships in other trade or professional organizations (if any): \_\_\_\_\_

Number of years of employment with remodeling company listed above? (must have at least 3): \_\_\_\_\_

Has this or any other company you have owned and /or been employed by, filed for bankruptcy?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, list company name(s): \_\_\_\_\_

Certificate of insurance expiration date: \_\_\_\_\_ Carrier: \_\_\_\_\_

Type of license: Class A \_\_\_\_\_ Class B \_\_\_\_\_ Class C \_\_\_\_\_ Gen. Contractor \_\_\_\_\_ Sub Contractor \_\_\_\_\_

License # \_\_\_\_\_ name in which license is held: Corporate name: \_\_\_\_\_

Trade name \_\_\_\_\_

License issued by: Newport News \_\_\_\_\_ Hampton \_\_\_\_\_ Other: \_\_\_\_\_