



SOUTHERN CALIFORNIA CONTRACTORS ASSOCIATION

Membership Application

600 City Parkway West, Suite 165
Orange, CA 92868

Phone: 657-223-0806 Fax: 657-223-0801

Please Select Membership Type Contractor Affiliate ADR

Company

Primary Contact Title

Mailing Address

City State Zip

Billing Address (if different)

City State Zip

Telephone Fax

Email Website

Contractor's License Classification

Referred By (Name & Firm)

Contractor Membership Dues

- Tier 1 (Gross Annual Volume 0 - \$500,000) \$550
Tier 2 (Gross Annual Volume \$500,001 - \$2,000,000) \$1650
Tier 3 (Gross Annual Volume \$2,000,001 - \$6,000,000) \$2750
Tier 4 (Gross Annual Volume \$6,000,001 - \$15,000,000) \$3850
Tier 5 (Gross Annual Volume \$15,000,001 and over) \$4950

Affiliate Membership Dues

- Tier 1 (Gross Annual Volume 0 - \$5,000,000) \$660
Tier 2 (Gross Annual Volume \$5,000,001 and over) \$1100

ADR Membership Dues (Alternate Dispute Resolution)

- Tier 1 \$330

The undersigned acknowledges and agrees that he/she has been authorized by the Applicant to submit this application on its behalf. All membership applications are subject to acceptance by the SCCA. In the event this application is accepted, Applicant agrees as follows: (a) Applicant agrees to comply with all bylaws, dues provisions, procedures, rules, including future amendments of the SCCA; (b) Applicant's Membership is subject to the provisions of the Articles of Incorporation, By-Laws, Code of Ethics, and Rules and Regulations, in force or hereafter adopted by the SCCA; (c) Should Applicant become delinquent in its membership for any reason, action may be taken in accordance with the provisions of the SCCA's By-Laws; (d) Applicant agrees to pay any legal or collection fees incurred by SCCA for non-payment of dues.

Print Name Date

Signature Company



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Collective Bargaining Representation

Please complete this section ONLY IF Applicant authorizes SCCA to act as its Collective Bargaining Representative. In the event Applicant authorizes SCCA to act as its Collective Bargaining Representative, Applicant's initials below also confirm Applicant's agreement to comply with all provisions of applicable Collective Bargaining Agreements.

Bargaining Authority & Power of Attorney: The undersigned designates SCCA as its sole and exclusive representative for the purpose of negotiating and executing the collective bargaining agreements (master labor agreements) and representation in labor relations between the undersigned and the Union(s) noted below. This Power of Attorney shall continue in full force and effect unless and until the undersigned provides written notice of its revocation, via fax or certified mail (return receipt requested), to the Director of Labor Relations simultaneously therewith to the appropriate Union(s). It is understood that a copy of this Power of Attorney may be provided to the Union(s) initialed below.

11 Counties

- Cement Masons
International Union of Operating Engineers Local No. 12
Southern California District Council of Laborers
Teamsters Joint Council No. 42 and Teamsters Local Union No. 87
United Brotherhood of Carpenters and Joiners of America

12 Counties

- Concrete Pumpers
District Council of Ironworkers of the State of California and Vicinity
Gunite/Shotcrete Commercial Agreement
Horizontal Directional Drilling Agreement
Master Inspection Field Soil and Material Testing
Master Landscape Agreement
MCOG
Parking and Highway Improvement Agreement (Striping, Slurry, and Seal Coat Operations)

San Diego

- Cement Masons
District Council of Ironworkers of the State of California and Vicinity
International Union of Operating Engineers Local No. 12
Laborers Local Union No. 89
United Brotherhood of Carpenters and Joiners of America
Teamsters Local Union No. 36

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Company \_\_\_\_\_