



FOUNDATION REPAIR ASSOCIATION, INC.

P.O. Box 1 Hurst, TX 76053
866-561-FRAI FAX: 817-595-3239 www.foundationrepair.org

MEMBERSHIP APPLICATION

(Please Print All Information)

COMPANY INFORMATION

COMPANY NAME: CHAPTER:
DBA NAME: MEMBERSHIP TYPE*: 0 CONTRACTOR 0 ASSOCIATE
ADDRESS: IF ASSOCIATE APPLICATION, VENDOR TYPE: 0 ATTORNEY
0 BRICK MASONRY 0 CONCRETE PRODUCTS 0 ENGINEER
CITY, STATE, ZIP: 0 EQUIPMENT/SMALL TOOLS 0 Foundation Repair Products
TELEPHONE: FAX: 0 INSURANCE 0 PLUMBING 0 STEEL PRODUCTS
0 Other:
DATE ESTABLISHED: FED TAX ID NO.: TOLL FREE:
E-MAIL ADDRESS: Person(s) to whom communications should be sent:
WEBSITE ADDRESS: IF MORE THAN ONE BRANCH, ATTACH A LIST OF OTHER LOCATIONS. NOTE:
EACH BRANCH MUST JOIN AS A MEMBER IF LOCATED WITHIN ANOTHER CHAPTER'S GEOGRAPHIC AREA.
* INDICATE WHETHER APPLYING FOR MEMBERSHIP AS A CONTRACTOR OR ASSOCIATE. SEE DEFINITIONS BELOW.

OWNER/PRINCIPAL INFORMATION

OWNER/PRINCIPAL STOCKHOLDER'S NAME:
ADDRESS:
CITY, STATE, ZIP:
TELEPHONE: FAX: E-MAIL:

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Acknowledgements

As an applicant for membership in the Foundation Repair Association, Inc., you (and/or your company) agree to abide by the Code of Ethics, Advertising Standards, and By-Laws of the association and to mediate all disputes between yourself and other members or the public in accordance with the procedures defined by the By-Laws of the association.

Applicant further understands the following requirements for membership:

- 1. In active business for a minimum of three years under the company's name or DBA name.**
2. Satisfactory BBB report for the applicant.**
3. Satisfactory credit references from three major suppliers or a Dun & Bradstreet report with a satisfactory payment history.**
4. The maintenance of a minimum of \$500,000 general liability insurance.**
5. The maintenance of workers comp or employee accident insurance.**

Applicant agrees to forward to the association a Certification of Insurance each year evidencing renewal of general liability and workers compensation insurance.**

Memberships, as defined by the by-laws are

Contractor: Any individual or company whose primary business is the repair of foundations

Associate: Any individual or company other than Contractor members.

Membership Fees: Contractor - \$395.00 per year Associate - \$265.00 per year

ALL APPLICATIONS MUST BE ACCOMPANIED BY:

- 1. Check for the amount of membership (prorated by the month application signed).
2. Certificate of Insurance evidencing a minimum \$500,000 general liability insurance.**
3. Certificate of insurance evidencing workers comp or employee accident coverage.**
4. Credit references from three major suppliers or a Dun & Bradstreet report with acceptable payment history.**

The undersigned has read this entire acknowledgement, understands and agrees to its contents on behalf of the organization applying for membership.

Date Signature

Print Name

** Requirement of Contractor applicants ONLY.