

# Application for Membership



The undersigned hereby makes application for membership in the Builders Exchange of Kentucky, Inc., agreeing, if accepted, to abide by the rules and regulations embodied in the Articles of Incorporation and By-Laws of the Exchange.

**(Please Print)**

Date: \_\_\_\_\_

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

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

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address, If different from above:

\_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Web Site Address: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Our Primary Business is: \_\_\_\_\_

Category: \_\_\_\_\_ General Contractor  
\_\_\_\_\_ Sub-Contractor  
\_\_\_\_\_ Supplier/Mfr. Rep.

Please direct all correspondence to Mr./Ms. \_\_\_\_\_

Title: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Year established: \_\_\_\_\_ Approximate Annual Volume: \_\_\_\_\_

Principal or Principals name: \_\_\_\_\_

Certified DBE status: MBE \_\_\_ WBE \_\_\_ DBE \_\_\_

Federal Tax I.D. Number: \_\_\_\_\_

Your Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

For Office Use Only:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PROUD AFFILIATE OF





Please complete the information below for each employee of your firm who should receive the E-Newsletter. For those who need access to our on-line construction reports/plan room, please create a User ID and Password. The Password must be more than 4 characters in length. It may be any combination of letters and/or numbers. (Use Additional Sheet If Needed). Please type or print legibly.

\* The Administrator will be responsible for updating company personnel as needed. Only the Exchange can administer passwords.

	<u>Persons Name</u>	<u>Title</u>	<u>E-Mail Address</u>	<u>User ID</u>	<u>Password</u>
*1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____

Firm Name \_\_\_\_\_ Phone/Fax \_\_\_\_\_ / \_\_\_\_\_

Address \_\_\_\_\_ Your Name(Administrator\*) \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Date \_\_\_\_\_

Please list your company's web-site address if applicable. \_\_\_\_\_

Please list your company's general e-mail address if applicable. \_\_\_\_\_

Please fax this form to Builders Exchange of Kentucky, in Lexington 859-288-0095 OR in Louisville 502-459-9803. We will notify you when the user id and passwords have been established.

**THE BUILDERS EXCHANGE ONLINE SERVICE AGREEMENT:**

1. I understand **THE BUILDERS EXCHANGE IPIN SYSTEM** is for use only by those companies, agencies and individuals that have a fully paid membership to **THE BUILDERS EXCHANGE**. Furthermore, I understand the information contained therein is proprietary in nature under copyright law, and has market value.
2. Only employees of the company listed below will use the IPIN system. Employees are defined as persons receiving a W-2 from said company for the current year. **Sub-contractors and consultants are not considered employees.**
3. Any distribution of account name(s) and password(s) to person or persons outside your company will result in ***immediate termination of all services.***
4. I understand that when I have employees that terminate employment with our company, I will notify Builders Exchange promptly.
5. I understand that Builders Exchange may cause our password(s) to be changed from time to time.
6. **I will on the attached sheet list the name and password for each employee of my firm who is to have access to your on-line project information. (As defined above.)**

I understand and agree to the following terms and conditions as they apply in using THE BUILDERS EXCHANGE ONLINE service.

Signed: \_\_\_\_\_

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

Title: \_\_\_\_\_

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

Date: \_\_\_\_\_