



Sheboygan Contractors Association

Membership Application

\$125 For 1 year's dues

For Contractors of Sheboygan County

Email application to: sca@sheboygancontractors.org or

Mail application to: Sheboygan Contractors Association, 4307 S. Taylor Dr., Sheboygan, WI 53081

General Information (*required fields)

*Company: _____

Check one: Corporation Company Individual

*Representative: _____

*Address: _____

*City/State/Zip: _____

*Phone: _____

Fax: _____

Email: _____

Website: _____

*Type of Business: _____

*Type of Work Done: _____

If supplier, which type of business do you supply: _____

How many years in business? _____

Is your company a: Contractor Supplier Sub-Contractor Architect/Engineer Other: _____

List three trade references:

If required by the City of Sheboygan, do you hold a valid contractors license? Yes No

If yes, please list type and license number _____

Do you hold contractors license from another city? List city and license number:

Membership Agreement

Applicant's Signature

Date

Membership Committe Approval: Yes No

Date

Approval Signature

Date

Membership Approval: _____
