



Membership Application

625 Taylor Street, Columbia, SC 29201
 Phone: (803) 256-6238 Fax: (803) 779-0635
www.BIAofCentralSC.com

Primary Contact Name: _____

Prefix / First Name / Middle Initial / Last Name / Suffix

Title: _____

President/CEO, Owner, VP/Gen. Manager, etc.

Company Name: _____

Number of Employees at This Location: _____

Physical Address: _____

Street City State Zip County

Billing Address: _____

Street or P.O. Box City State Zip

Work Phone: _____ **Ext:** _____

Mobile: _____ **Fax:** _____

Phone Preference:
 __ Mobile __ Work __ Home/TF

Work E-mail: _____ **Company Website:** _____

Home Address: _____

Street or P.O. Box City State Zip County

Home Phone: _____ **Mobile:** _____ **E-mail:** _____

Spouse's Name: _____ **Voting Precinct:** _____

Membership Type:

(Choose One)

Builder/Developer
 (\$575+/year)

Associate
 (\$575/year)

Affiliate
 (\$310/year*)

+ **Builder dues** are \$575/year plus \$10 per building permit issued. Permit fees are invoiced quarterly.
 + **Developer dues** are \$575/year plus \$10 per lot developed. Development fees are invoiced quarterly.
 * **Affiliate Memberships** are available to Builder/Associate member firms only. There must be at least one full membership at your business location in order to qualify for this membership type.
Add a Sales & Marketing, Remodelers, Commercial Builders, Land Development or High Performance Building Council membership for any member of your company. Applications available upon request.

I agree to abide by the Constitution and By-Laws of the Local Association to which this membership application is directed, of the National Association of Home Builders with which it is affiliated, and of the affiliated State Association. A Remittance of \$_____ representing my annual dues in the affiliated Association accompanies this application. "Dues payments to the BIA of CSC are NOT deductible as charitable contributions for federal tax purposes. However, dues payments may be deductible by members as an ordinary and necessary business expense."

Signature _____

Referred for Membership by: _____

Name & Company

BOARD ACTION
 Approve – Hold – Reject

 Initial Date

**Credit and/or Personal
 References May Be Requested**