

HAS THE FIRM, THE LICENSE HOLDER OR ANY EMPLOYEE BEEN CHARGED WITH A VIOLATION OF ANY SAFETY CODE AND BEEN ASSESSED A FINE AS A RESULT OF BUSINESS PRACTICES IN THE LAST FIVE YEARS? IF SO, PLEASE GIVE DATES AND DETAILS. USE ADDITIONAL PAPER IF NECESSARY. _____

THIS FIRM CERTIFIES THAT THE ABOVE STATEMENTS ARE CORRECT AND AGREES, IF ELECTED TO MEMBERSHIP, IT WILL BE GOVERNED BY THE ARTICLES OF INCORPORATION, RULES AND REGULATIONS AND DUES' STRUCTURE OF THE ASSOCIATION AS LONG AS IT CONTINUES AS A MEMBER, AND FURTHER AGREES TO PROMOTE THE OBJECTIVES OF THE ASSOCIATION SO FAR AS POSSIBLE.

THE FIRM HEREBY MAKES APPLICATION FOR MEMBERSHIP ON THE BASIS OF THE FOREGOING STATEMENTS.

BY _____

TITLE _____

DATE _____

ASSOCIATE MEMBERSHIP DUES STRUCTURE (Billed Semi-Annually)

Associate Membership \$540.00

(Business providing a product or service to the HVAC industry)

New Member Initiation Fee \$200.00

ENCLOSED IS OUR CHECK IN THE AMOUNT OF \$200.00 PAYABLE TO THACCA.