



CRITERIA FOR OIRCA AFFILIATED CONTRACTOR MEMBERSHIP

1. Each applicant at the time of application for membership must
 - (a) be engaged in the operation of a sub-contracting or general contracting business in the Province of Ontario for a minimum of three (3) years; and
 - (b) confirm in writing that they are not involved in the application of either ICI or residential roofing products or systems.
2. Each applicant at the time of application for membership must be an Ontario based Corporation with an established office in the Province of Ontario.
3. Must submit a formal application with a cheque in the amount of \$500.00 + HST payable to OIRCA, which will be termed an Application Fee. When accepted as a member of OIRCA, annual dues of \$1,700.00 + HST will be assessed.
4. Must submit letters, addressed to the Ontario Industrial Roofing Contractors Association, from at least 3 companies attesting to the applicant's good character, business experience and reputation.
5. The OIRCA Membership Committee and Board of Directors reserve the right to reject any Affiliated Contractor Membership application that does not meet this criteria, or is deemed to be not in the best interest of the Association. All denied applications are final.
6. Affiliated Contractor Membership may be terminated at any time and at the sole discretion of the Board of Directors.

*Ontario Industrial Roofing Contractors Association
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1-888-33 OIRCA (336-4722) web: www.ontarioroofing.com e-mail: oirca@ontarioroofing.com*



APPLICATION FOR AFFILIATED CONTRACTOR MEMBERSHIP IN OIRCA

COMPANY: _____
(Please Print or Type)

ADDRESS: _____

TELEPHONE: _____ FAX: _____

E-MAIL: _____ WEB: _____

REPRESENTED BY: _____
(Name & Title)

I hereby make application for Affiliated Contractor Membership in the Ontario Industrial Roofing Contractors Association, and undertake the following:

To accept the rules and regulations of the Association as set forth in the Constitution and By-laws.

To pay such membership fees and assessments as may from time to time be levied.

SIGNATURE: _____ DATE: _____

This application is to be accompanied by a cheque, payable to OIRCA, in the amount of \$500.00 + HST) which covers the Application Fee.

ACCEPTED BY: _____
(For the OIRCA Board of Directors)