

PRODUCER MEMBER APPLICATION

| Company | | | | |
|---|--|----------------------|--|-----------------|
| Address | | | | |
| City, State, Zip | | | | |
| Phone Number | | | | |
| Fax Number | | | | |
| Website | | | | |
| Email Address | | | | |
| Voting Member | | | | |
| Plant address (if different f | rom above) | | | |
| Phone | Fax | Toll Fre | e | |
| Company Personnel | <u>Title</u> | <u>Address</u> | <u>Telephone</u> | <u>Email</u> |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| TYPE OF CONCRETE MAS () Concrete Paver Check applicable production This information is confident Dues are based on this year | () Seg. Retaining Wa on below. Please <i>com</i> ential and for the use o | ll () Roof Paver (| Other m for each plant in oper ers only. | |
| Eight Inch Equivalents Produced or Sold | | r Sold | Annual Dues | |
| () | 0 to 1,000,000 | | \$2,430.00 | |
| ` , | 1,000,000 to 2,000,000 | | \$3,490.00 | |
| | 2,000,000 to 3,000,000 | | \$4,710.00 \$5,770.00 | |
| () | 3,000,000 to 4,000,000 4,000,000 and over | | \$5,770.00 \$6,985.00 | |
| () | 4,000,000 and 0101 | | 40,000.00 | |
| A Promotional Fund asses | sment of \$800 per CMI | J plant will be adde | d to the total. | |
| Total number of cavities _ | | | | |
| Dues are payable at the be Indicated payment: Annually | | ing period selected | —1 st day of each quarte | er or annually. |
| I hereby certify that the above in commitment for one year of due indefinitely in one year incremer | s payment for the period Ja | anuary 1 to December | 31 as a producer member. I | |
| | | | | |
| | | | | |

Authorized Representative

Please return form to info@scmaonline.org.

Title

Date