

CANA Contractors Association Northern Arizona

P.O. Box 1457 Pinetop Arizona 58936

Application for Membership

Licensed Contractors

Name of Organization _____

Mailing Address _____

Phone _____

Applicant/Title _____

Workman's Comp Carrier _____

Agents Name Address _____

R of C Contractors License# _____

Are you in good standing with the ROC? _____

Have you ever had a complaint against your license _____

If so did you take care of it in a timely Manner _____

Have you ever had your license revoked _____

You must include \$100.00 Check payable to Contractor Association of Northern for your yearly Dues.

Signature _____ Date _____

Do not Write Below This Line

Approved _____ Disapproved _____

Signature _____ Date _____
