Pennsylvania LICA Membership Application (Please fill out entire application)

Company Name:				
Member (contact) Name:				
Street Address:				
City:	State <u>:</u>	County: Zip:		
Phone: ()		Cell Phone: ()		
Date of Membership:	SPO	NSORED BY?:		
Email Address:		Website Address:		
Contractor Type o	f Business	-(<mark>check ALL that apply</mark>)		
☐ CR Crane Service		ODW Open Ditch Work		
☐ DI Drainage/Irrigation		OSW On Site Waste Treatment		
☐ EC Erosion Control		PA Paving		
☐ EMC Earthmoving/Land (Cleaning	PD Ponds or Dams		
☐ EXG Excavating/Grading		R Reclamation		
☐ HD Hard-Scaping		SEP Septic Systems		
LL Land Leveling		☐ TH Trucking or Hauling		
LS Landscaping		☐ TW Terraces or Waterways		
☐ SA Dealer,	Service Co., Go	vernment Agency, Consultant, Insurance Agency	,	
Application is for	Check One	<u>e)</u>		
Active Contractor Member (Annual Dues)			\$	350.00
• •	,	Dues)ls, equipment or services to contractor memb	\$ pers)	250.00
Supporting Member (And Person(s) or association		ALICA (with no vote)	\$	50.00
Signature		Date		

Mail checks--made payable to: PA LICA

775 Mercer Road Greenville, PA 16125 ATTN: Joanie Micsky