



Independent Electrical Contractors
of the Builders Association
of Northwestern Pennsylvania
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Please complete this application for membership

Name business is currently under

Name business is currently under

EIN / Social Security Number

Number of Employee

Type of Business (corp., partnership, individual)

Name of Officers or Partners

CITY

STATE

ZIP

PHONE

FAX

E-MAIL

Business References:

NAME

ADDRESS

PHONE

NAME

ADDRESS

PHONE

NAME

ADDRESS

PHONE

Authorized Signature

Date Signed