



Membership Application

Thank you for your interest in the
Virginia Transportation
Construction Alliance.

Contractor Member

Virginia Transportation Construction Alliance

Please return this application for
membership with a check for dues made
out to VTCA to:

Virginia Transportation Construction Alliance
620 Moorefield Park Drive, Suite 120
Richmond, Virginia 23236

Phone: (804) 330-3312 Fax: (804) 330-3850



Virginia Transportation Construction Alliance

Guidelines for determining total volume for Contractor Members of the VTCA:

Dues for Contractor members are \$850.00 per calendar year. Fees are assessed based on the member's revenue from all VDOT and municipal contracts and subcontracts performed in the Commonwealth of Virginia financed in whole or in part by public funds, including bond issues of local governments, associations, corporations or authorities on types of work normally performed by transportation contractors and engineering firms. Fees are based on revenue from work performed from October 1 through September 30 of the preceding year.

Work involving airports, ports, rail, military facilities and private development is not included in the fee structure except to the extent that it includes work that is part of the Commonwealth's highway or street system and is funded in whole or in part by public funds or by bond issues as described above. The Commonwealth's highway or street system is meant to include highways, streets and related infrastructure throughout the Commonwealth whether built or maintained by VDOT or the Cities, Counties and/or Municipalities within the Commonwealth. Specifically, this includes all VDOT procurement, contracts awarded under the Public-Private Transportation Act (PPTA), all highway or street projects within Cities, Counties and Municipalities funded in whole or in part by Federal or State funds or bond issues.

In calculating the total volume it is intended that prime contractors will deduct from their gross dollar volume the dollar value of work performed by subcontractors who are members of VTCA at the commencement of the subcontractor's work. Subcontractors will be expected to report their volume of work in the same manner.

Please check the box below that corresponds with your Transportation-related revenue. Then transfer the fee listed to calculate your yearly membership investment.

Contractor Fee Schedule		
Revenue	Rate	Maximum
First \$1,000,000	0.0024	2,400.00
Next \$7,000,000	0.00132	9,240.00
Over \$8,000,000	0.00018	

Dues, fees and contributions are not deductible as charitable contributions but may be deductible as ordinary and necessary business expenses. Also, the Omnibus Budget Reconciliation Act of 1993 does not permit you to deduct that portion of your dues attributable to our lobbying efforts. This year, fifty percent of \$850 will not be tax deductible as an ordinary and necessary business expense.

Our total volume for this period was \$ _____.

Dues are \$850.00 per year. In addition, fees are based on revenue from transportation related work* for the period of October 1 through September 30 preceding the date of your application. VTCA will calculate your fees based on the above fee schedule. Dues and fees are invoiced quarterly. Dues and fees will be capped at \$35,000.

APPLICATION FOR MEMBERSHIP

Contractor

The undersigned hereby makes application for membership in the Virginia Transportation Construction Alliance, as a Contractor Member

This application will be presented to the Board of Directors and, if elected, the undersigned agrees to be governed by the Bylaws of the Association and to aid and assist in advancing the mission and Code of Ethics of the Association.

Name of Firm: _____

Street Address: _____

Mailing Address: _____

City, State, Zip: _____

Phone: (____) _____ Fax: (____) _____

Company E-mail: _____

Web Site: _____

Areas of Expertise: _____

Names and titles of principals:

<u>Name</u>	<u>Title</u>	<u>E-mail</u>
Mr./ Ms./ Mrs. _____	_____	_____
Mr./ Ms./ Mrs. _____	_____	_____
Mr./ Ms./ Mrs. _____	_____	_____

Primary Contact Person for VTCA:

Mr./ Ms./ Mrs. _____
(Name, title, e-mail address please)

Signature and Title Date

To complete your application for membership, the revenue information to the left must be completed and you must submit a check in the amount of \$425.00. We will then invoice you quarterly for the balance of your dues and fees.

Referring Member Company and Contact (if applicable):
