



**NORTH STATE
BUILDING INDUSTRY
ASSOCIATION**

North State Building Industry Association

1536 Eureka Road, Roseville, CA 95661

Phone: (916) 677-5717

Fax: (916) 677-5734

Email: northstatebia@northstatebia.org

www.northstatebia.org

Please type or print neatly. Please ensure the information provided is exactly how you wish to see it appear in the BIA directory.

COMPANY INFORMATION

Company Name: _____ Type of Business: _____

MAIN COMPANY CONTACT - The Main Company Contact will receive all BIA mail and be listed as the main contact in BIA membership records. If you want to add additional company contacts to the BIA mailing list, please contact the BIA office.

Main Company Contact: _____ Title: _____

Business Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) _____

E-Mail: _____ Web Address: _____

MEMBERSHIP SPONSOR - Please identify your membership sponsor. Sponsor must be an employee of a North State BIA member company.

Sponsor's Name: _____ Company: _____

BILLING INFORMATION - Please indicate who should receive annual BIA membership dues notices. Membership dues are billed annually according to your payment anniversary month. If the individual is the same as the Main Company Contact, please leave blank.

Billing Contact: _____ Email: _____

MEMBERSHIP DUES and VOLUNTARY FEES **Dues and fees are subject to change by the BIA Board of Directors – Membership dues are based on the number of employees. Please indicate your membership type and dues level:

☐ Associate OR ☐ Subcontractor/Trade # of Employees _____

☐ \$949 (1-10 employees)

☐ \$1049 (11-40 employees)

☐ \$549 Member in Retirement

☐ \$1149 (41-100 employees)

☐ \$1249 (100+ employees)

(Must meet criteria as indicated in Bylaws)

Your membership in the BIA automatically registers you as a member of the National Association of Home Builders (NAHB) and the California Building Industry Association (CBIA). Dues paid are not deductible as charitable contributions for federal income tax purpose but may be deductible as ordinary and necessary business expenses except for those portions used for lobbying and political activities. For 2023, those portions deemed non-tax deductible are 18% of \$198 NAHB dues, or \$35.64; 29% of \$75 CBIA dues, or \$25; and 25% of \$576 NSBIA (base) dues, or \$144. Dues and fees are subject to change by the BIA Board of Directors.

In addition, your total dues include a \$75 contribution to CBIA's PAC, and a \$25 contribution to NSBIA's PAC, The Committee for Home Ownership (ID#782240). These are also non-tax deductible. Please indicate below if you do not want these contributions to go into these respective PAC's, but instead into an industry education fund.

CBIA: Redirect my \$75 contribution instead towards CBIA's Political Education Fund x _____

NSBIA: Redirect my \$25 contribution instead towards NSBIA's Industry Education Fund x _____

Please note that PAC contributions may require disclosure if your business makes political contributions of \$10,000 or more during a calendar year. If you are uncertain of your disclosure obligations, please seek further advice from a campaign reporting professional.

MEMBERSHIP DUES PAYMENT OPTION (Select A or B) - Indicate your method of payment for the above indicated dues.

☐ A) I elect to pay my membership in full.

☐ B) I elect to pay my membership in monthly dues payments that includes a \$3 monthly processing charge and are automatically charged to my credit card on file each month with an automatic membership renewal each year.

FORM OF PAYMENT - Your membership dues payment must accompany this application.

Check (payable to BIA or Building Industry Association) **Check Number** _____

☐ **VISA** ☐ **MasterCard** ☐ **Amex** _____ **Card #** _____

Expiration Date: ____/____/____ **CRV Code** _____ (Required 3 digit # appearing after account number usually on back of card.)

Full Billing Address for Card: _____

Cardholder Name: _____ **Cardholder Signature:** _____

MEMBERSHIP AGREEMENT I have read the above application and agree to comply with BIA bylaws and any duly implemented modifications.

Signature _____

Printed Name _____ **Date:** _____

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