



Please fill out this application to be considered for the 1-888-Abatement contractor network. 1-888-Abatement certified members are companies that perform primarily asbestos and lead abatement, and are leaders in the industry for their geographical area. Please answer every question; applications with missing information will not be considered.

BUSINESS INFORMATION

Business Name:

Address:

City:

State:

Zip Code:

Contact Name:

Title:

Telephone Number:

Email:

Website Address:

Number of Years in the Abatement Business:

Annual Sales:

What Area Codes Do You Service?



COMPANY OVERVIEW

State Contractors License Number:

Asbestos Removal License Number (DOSHS #, etc):

Is Asbestos and Lead Removal your primary source of revenue? Yes No

What percentage of your revenue comes from insurance related work?

What services do you provide? (Asbestos abatement, lead removal, bed bug removal, demolition, etc)

Do you have a brick and mortar building customers can visit? Yes No

Are you part of any other network or franchise related to abatement? Yes No

Approximately what percentage of work do you sub out?

Do you use any estimating software? Yes No

If yes, please list it here:

How many technicians do you currently employ?

How many Project Managers?

How many Estimators?



How many Supervisors?

How many Salespeople?

How many Administrative Staff?

MARKETING

Do you have a toll free telephone number? Yes No

Do your employees wear uniforms? Yes No Partial

Are your company vehicles branded with your logo or other company information?

Yes No Partial

Is your firm associated with any other trade groups, franchises, or networks related to abatement?

If so, please describe:

Briefly describe your company's current marketing strategy. Please include details about salesman, web and print advertising, brochures, sponsorships, trade shows, networks, associations, approved vendor programs, etc.

EQUIPMENT/RESOURCES

Who do you currently buy your supplies from? Please name all suppliers:



Please provide an overview of your company's equipment:

Number of HEPA Vacuums

Number of Negative Air Machines

Number of Showers

Number of Rolls of Poly

Number of Cases of TyVek or Equivalent Suits

Other

Please describe any other pertinent equipment:

Vehicle Fleet

Please provide the number of each in your current vehicle fleet:

Vans

Cars

Cube Trucks

Dump Trucks

Pickup Trucks

Dump Trailers

Fixed Trailers

Tractor Trailer



Please describe any other vehicle equipment you have:

Has your company ever filed for bankruptcy?

If so, how long ago?

Is anybody in your company involved in any litigation?

If so, please describe:

Has your company ever been cited for failure to comply with any local, state, or federal regulations?

If so, please describe:



Please describe your insurance information below; please also include a hard or soft copy of these policies:

Commercial General Liability

Carrier:

Coverage:

Expiration:

Pollution Liability

Carrier:

Coverage:

Expiration:

REFERENCES

Are you an approved vendor by at least 2 insurance companies?

Yes

No

If so, please list the company names:

Please provide three adjuster references

(1)

Company Name:

Adjuster:

Telephone Number:

Email:

(2)

Company Name:

Adjuster:

Telephone Number:

Email:



(3)

Company Name:

Adjuster:

Telephone Number:

Email:

Please provide three business references (vendors, suppliers, consultants, etc)

(1)

Company Name:

Contact:

Telephone Number:

Email:

(2)

Company Name:

Contact:

Telephone Number:

Email:

(3)

Company Name:

Contact:

Telephone Number:

Email:



SUBMITTAL

I, the undersigned, certify that all the information provided in this application is true and accurate. 1-888-Abatement, its directors, committee members, and employees may review my application, and I will cooperate promptly and fully in such a review. I will submit to 1-888-ABATEMENT such documents and information deemed necessary to confirm the information in this application. All documents submitted to 1-888- ABATEMENT are the property of 1-888-ABATEMENT and will not be returned to me. I waive all claims relating to or rising out of review by 1-888-ABATEMENT of this application, and I indemnify, release, discharge and exonerate 1-888-ABATEMENT for any action taken relating to such review, including denial of my application, revocation, suspension or other sanction for any action taken pursuant to the rules and standards of 1-888-ABATEMENT.

I understand that I shall be notified of membership acceptance by 1-888-ABATEMENT in writing and that receipt of this application by 1-888-ABATEMENT DOES NOT constitute approval of membership.

I shall not make any claims of holding 1-888-ABATEMENT membership until such official notification, has been received in writing from 1-888-ABATEMENT. I also agree not to use the 1-888-ABATEMENT logo until my application is approved, and I understand that unauthorized use of the logo may result in rejection of my application and forfeiture of all payments, as well as further legal action. By signing, I acknowledge that I have read and understand the information in this application and agree to abide by these terms and rules. By checking yes, I acknowledge that I have read and understand the information in this application and agree to abide by these terms and rules.

I agree with and will comply with the terms above: Yes No

Sign:

Date:

Please email this application to membership@8884abatement.com or fax to [916-231-0096](tel:916-231-0096).