



ILLINOIS EQUIPMENT DISTRIBUTORS

moving industry forward since 1951

APPLICATION FOR REGULAR MEMBERSHIP

Please complete and return to: the person who gave you this form or to the address below. (page 1 of 3)

Firm Name _____ Date _____

Street Address _____

City _____ State _____ Zip _____ Website _____

Phone () _____ FAX () _____ e mail _____

Official to receive IED mailings (Please print or type) _____

Territory covered _____

Number of years actively engaged in distributing construction equipment _____

Is your firm a: ___ corporation, ___ partnership, ___ sole proprietorship?

Does your firm warehouse representative stocks of new construction equipment? ___ yes ___ no

Does your firm operate a service shop? ___ yes ___ no; employ service mechanics? ___ yes ___ no

Number of employees: Sales ___ Service ___ Other ___ Total ___

Unionized ___ yes ___ no If yes, What Union? _____

Regular Member Applicant: Please describe your relationship with our industry and your reasons for applying for membership.

Applicant Name: _____ Title _____ Signature _____

PRINCIPALS OF YOUR ORGANIZATION

NAME

TITLE

General Manager _____

Sales Manager _____



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REGULAR MEMBER INDUSTRY CLASSIFICATION

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Firm Name _____ Date of Application _____

In order for IED to properly develop a clear profile of the types of distributors it represents, and to enable IED to tailor its programs and services more directly to member needs, the following information is requested:

Primary sales emphasis is in: (check only one)

HEAVY EQUIPMENT (earthmoving, including crawler and wheel tractors and loaders, scrapers, large hydraulic excavators, heavy cranes and shovels, motor graders, crushers, asphalt plants, etc.)

GENERAL EQUIPMENT (wheel & crawler tractors & loaders, wheel loader backhoes, hydraulic excavators other than heavy earthmoving, air compressors, etc.)

LIGHT & LIGHT INDUSTRIAL EQUIPMENT (Landscape, concrete finishing equipment, mortar mixers, masonry saws, scaffolding, space heaters, air & electric tools, etc.)

Our principal lines are: (Use asterisk to denote contracts for primary responsibility in a specified territory)

(manufacturer)	(product)
(manufacturer)	(product)
(manufacturer)	(product)

FOR OFFICE USE ONLY

Active Member Sponsors:

Application Approved by:

1. Name _____

(IED Chairman, Membership Committee)

Company _____

(IED President)

2. Name _____

Annual Dues Regular Member \$ _____

Company _____

Enrolled Date: _____

Application originated by: _____ Date: _____



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Application Regular Member – Branches

Please complete and return to: the person who gave you this form or to the address below. (page 2 of 3)

Firm Name _____ Date _____

Total Number of Branches: _____

ADDRESS

NAME OF MANAGER

1. _____ _____	_____
2. _____ _____	_____
3. _____ _____	_____
4. _____ _____	_____
5. _____ _____	_____
6. _____ _____	_____

Are you affiliated with a manufacturer or contractor in the construction industry? _____

If yes, company name: _____

Is your firm an affiliate of another company? _____

If yes, name of parent firm: _____

Does your firm have an affiliate? _____

If yes, name of affiliate: _____