



# 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

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

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: \_\_\_\_\_



# ILLINOIS EQUIPMENT DISTRIBUTORS

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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: \_\_\_\_\_