



Take the first step in becoming part of the Techo-Pro Advantage Program and fill out your application today!

Name: _____

Company Name: _____

Address: (Street, City, Province, Postal Code) _____

Business Phone (for referral purposes): _____ FAX: _____

Cellular Phone: _____ Other Phone: _____

E-mail Address: _____ Website Address: _____

In business since year: _____ Business Type: Residential Commercial

Company Description: (include specialties, expertise, experience) _____

Licenses and Insurance Coverage

Business Licenses/Permits: **(Please attach a copy of all business licenses and/or permits applicable, otherwise indicate none)**

Copies of applicable licenses and/or permits are attached None applicable

General Liability Insurance Company: **(Please attach a copy of insurance certificate or policy document)**

Workman's Compensation Insurance Company: **(Please attach a copy of insurance certificate or policy document)**

Professional Certifications: **(Please attach a copy of your certification)** ICPI NCMA APPQ Other: _____

Professional Associations: _____

Projects of Interest: (check all that apply)

Exterior: Design Build

Driveways Stoops Walkways Patio Construction Landscape Applications

Water Features (ponds, pools, etc.) Retaining Walls Masonry Veneers

Interior: Design Build

Masonry Veneers

Maximum Project Size:

\$5,000 - \$10,000 \$10,000 - \$25,000 \$25,000 - \$50,000 \$50,000 - \$100,000 \$100,000 +

Photos & References:

1. Please attach two different photos of retaining walls, two different photos of a walkway, patio and driveway you have completed within the past 2 years. Please number photos according to references contact information.
2. Include the homeowners' names, telephone numbers and complete addresses for the photos you've supplied: (for reference purposes)

Homeowner 1: _____ Homeowner 2: _____

3. Indicate the dealer or dealers from whom you purchase your hardscape materials: (for reference purposes)

Dealer Name: _____ Telephone: _____

Dealer Name: _____ Telephone: _____

Do you provide technical building plans? Yes No

Do you recommend an architect? Yes No

Do you provide free estimates? Yes No

SIGNATURE: _____ **DATE:** _____

Be sure to provide all information and attach requested documents with your application.

FAX TO: 450.656.1120 • **GO ONLINE TO:** www.techo-pro.com
MAIL TO: 5200 Albert-Millichamp Street. St-Hubert, Quebec J3Y 8X8