

Application for NACC Certification



1. AG&M Contractor Company Name		2. Name of Company Owner (s)	
3. Name and Email of Company President or CEO			
4. Name and Title of person completing this application			
5. Company Physical Address		City	State
6. Company Mailing Address		City	State
7. Contact email address		8. Company Website	
9. Company Phone Number		10. Phone number for main contact person	
11. Additional Location(s)			
12. Is additional location a fabrication facility?			
13. Total Number of Employees	14. Number of staff in Estimating/ Project Management	15. Number of staff in Shop/ Fabrication	16. Number of staff in Field Operations
17. Estimated number of annual job sites			
18. What competency categories are you applying for per table 2c (please check boxes) Entry Systems (Ext. or Int.) Interior Glazing Building Envelope Low Rise Building Envelope High Rise Horizontal Glazing Active Glass Handrail/Balcony Systems Service Work AGMT Staffing		19. Company years of experience in AG&M	20. How many years has company been owned by current ownership?
21. In the past 3 years has your company been terminated from any project for any reason related to defective work? Yes No (circle one)			
22. In the past 5 years have there been any judgments, claims, or arbitration proceedings or suits pending or outstanding against your company due to a construction defect? Yes No (circle one)			
22a - In the past 5 years, have there been any judgments or claims made by regulatory bodies against your company?			
22b - If you answered "yes" to any of the above questions, how many times has this occurred in the past 5 years?			

Please provide explanation and completed resolution for any yes answers to be evaluated for certification.

23. How did you hear about the NACC Program?

24. Why are you pursuing certification for your company?

Please complete this application for certification and email to jeff@amscert.com & mwilliams@amscert.com.