



Electrical Contractors Association of Ottawa

Application Form

CONTRACTOR MEMBERSHIP

Company Information

Date: _____

Company Name: _____

Owner(s): _____ ECRA #: _____

Master Electrician's Name: _____

Company Address: _____

City: _____ Prov: _____ Postal Code: _____

Tel: _____ eMail: _____

Fax: _____ Web Site: _____

Main Contact(s): _____ eMail: _____

Additional Contact(s): _____ eMail: _____

Type of Business (Please check all that apply)

Industrial Commercial Institutional Residential Service

Other: _____

Signatures

Signature: _____ Signature: _____

Title: _____ Title: _____

Membership Dues

ANNUAL MEMBERSHIP DUES	\$ 300.00
PLUS 13% H.S.T. (No. R107291197)	\$ 39.00
TOTAL ANNUAL DUES	\$ 339.00

Please Return To

Electrical Contractors Association of Ottawa

86 Greenfield Ave Ottawa, Ontario K1S 0X7
Phone: 613.238.1124 Fax: 613.238.8194
eMail: info@ecaottawa.org Website: www.ecaottawa.org

For Use Of ECA Ottawa

Approved by: _____

President: _____

Executive Director: _____

Date: _____