



Annual Wholesaler Membership Dues

APPLICATION FOR MEMBERSHIP

Name of Company: _____

Home Office P.O. Box Address: _____

Home Office Street Address: _____

City, State: _____ ZIP: _____

Phone Number: _____ Fax Number: _____

Website: _____

1. Kind of Wholesale Business (Check one or more for product code listings in SWA Directory)

- Wholesaler of Plumbing Supplies
- Wholesaler of Heating & A/C Supplies
- Distributor of Pipe, Valves and Fittings
- Distributor of Water System
- Distributor of Other Materials (List below):

2. Select which form of business organization among the following is applicable to you

- Proprietorship
- Partnership
- Corporation If so, are you a subsidiary of another corporation?

State of Incorporation: _____

3. List names of owner, partners, or officers.

Name _____ Title: _____ Email: _____

Name _____ Title: _____ Email: _____

Name _____ Title: _____ Email: _____

Name _____ Title: _____ Email: _____

4. Date of commencement of business: _____

5. Has there been any major change in ownership in the past 12 months? ___ Yes ___ No

6. Do you operate under another name(s)? ___ Yes ___ No

If so, list name(s) _____

7. Who will be your representative(s) in the Association? Name _____

Title: _____ **Email:** _____ **Phone:** _____

8. If you have any retail business, please show the percentage of total volume from retail sales and list the type of products sold: (Check one)

- 0-25%
- 25-50%
- Over 50%

Products: _____

9. Are you a member of a buying group or other trade associations? If so, please list _____

ADDITIONAL LISTINGS FORM

(SUBSIDIARIES, BRANCHES, SATELLITES, TWIGS, ETC.)

According to SWA Bylaws, every branch, including any subsidiary operation of a member company, must likewise be a member. Please complete the following information for additional listings.

Company Name: _____ Contact Person/Title: _____

P.O. Box: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Company Name: _____ Contact Person/Title: _____

P.O. Box: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Company Name: _____ Contact Person/Title: _____

P.O. Box: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

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Phone: _____ Fax: _____ Email: _____

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Mailing Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ Email: _____

Company Name: _____ Contact Person/Title: _____
P.O. Box: _____ City: _____ State: _____ Zip: _____
Mailing Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ Email: _____

MEMBERSHIP - ARTICLE III SWA Constitution and Bylaws

Section 1A - Wholesaler Members. Any sole proprietorship, partnership, firm or corporation located in the states of Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee, Virginia or the Caribbean principally engaged in the wholesale distribution of one or more of the following product categories: plumbing, heating, and cooling equipment and supplies; pipe, valves and fittings; and water systems, is eligible for membership in this Association, subject to the requirements enumerated in Section 2 of this Article.

Section 1B - Wholesaler Branch Members. Every branch, within the association's established territory, including any subsidiary operation of a wholesaler member company in good standing, must likewise be a member and shall be entitled to all benefits and privileges except that wholesaler branch members shall not be entitled to vote. A member company shall be responsible for payment of the prescribed dues for each of its branches.

Section 2 - Qualifications: Wholesaler Members. The basic qualification for membership is that a member or prospective member shall be principally engaged in the wholesale distribution for a period of not less than one year, of one or more of the following product categories: plumbing, heating, and cooling equipment and supplies; pipe, valves and fittings; and water systems, and providing such wholesale distribution functions as maintaining and owning a diversified inventory of industry products, breaking bulk shipments, providing delivery services, extending credit to diversified and varied customers and providing sales and technical assistance to suppliers and to diversified and varied customers.

Upon election to membership by the Board, and subscribing to the Constitution and Bylaws, the new member shall be entitled to all benefits thereof, upon payment of such initiation fee, if any, as the Board of Directors may fix from time to time and the appropriate amount of dues as established by the dues schedule in effect at the time of the election.

CONFIDENTIAL

DUES SCHEDULE AND CLASSIFICATION DESIGNATION FORM

This information is confidentially held at the SWA office. NO other wholesaler or any supplier, including SWA Board members have access to this information.

Please check below the total sales volume of plumbing, heating, and cooling equipment and supplies; pipe, valves and fittings; and water systems for your firm during your most recent fiscal year. VOLUME SHOULD INCLUDE HOME OFFICE AND ALL BRANCHES, SUBSIDIARIES, SATELLITES, TWIGS, ETC.

ANNUAL SALES VOLUME (Please Check One)

- Up to 1 Million - \$785**
- \$1-2 Million - \$935**
- \$2-5 Million- \$1,100**
- \$5-10 Million - \$1,470**
- \$10-15 Million- \$2,245**
- \$15-25 Million - \$2,800**
- \$25-50 Million - \$3,065**
- \$50-125 Million - \$3,815**
- \$125-250 Million - \$7,350**
- More than \$250 Million - \$7,875**

Billing Name: _____

Billing Address: _____

Email: _____

Billing Phone: _____

Check included: _____

Credit Card - <https://southernwholesalers.org/membership-levels/>