



National Service Alliance Membership Application

Company Name: _____
 Mailing Address: _____
 City: _____ ST: _____ Zip: _____
 Phone Number: _____ Fed. Tax ID: _____
 _____ Year
 Email Address: _____ Established: _____

Owner(s) of Company: _____

Primary Contact (Will receive all notifications - can be same as above): _____

Primary Contact email: _____

Are you MWBE _____ SDB _____ Other _____ Certification #: _____

Do you operate as: An Individual _____ Corporation _____ Partnership _____
 Other _____ Explain _____

A. If a Corporation, in what state(s) or province(s) are you incorporated?

B. List names of all partners or owners, titles and year of experience in the contract cleaning industry:

Employee Information:

Number of office employees at Corporate Headquarters _____ Total employees in company _____

Percentage full time _____ % Part time _____ % Management/ Employee Ratio: _____

List all branch locations (Cities, States or markets) you currently operate in. _____

List all subsidiaries including names and contacts (A separate sheet may be attached)

List of current Distributors:

Gross Annual Sales of contractors total company operation from previous 3 calendar years: (Required)

2019 _____ 2018 _____ 2017 _____

What percentage of your company is subcontracted? _____ % (Required)

Are you a Member of BSCAI? _____ Yes _____ No

Are you willing to sign a Group Purchasing Agreement? _____ Yes _____ No

Thank you for your interest in the NSA. After review and acceptance of this application, the NSA agreements and material will be sent for your review.

Prepared By: _____ Title: _____

Signature of Corporate Officer: _____ Date: _____

Email completed application to: nsa@nansa.org
 National Service Alliance, LLC
 149 Plantation Ridge Dr., Ste. 170
 Mooresville, NC 28117

