ILLINOIS ASSOCIATION OF AGGREGATE PRODUCERS

1115 S. 2ND ST., SPRINGFIELD, ILLINOIS 62704

NON-AGGREGATE MEMBERSHIP APPLICATION

COMPANY: _____ DATE: _____

ADDRESS: _____

CITY and STATE: _____ COUNTY: _____

TELEPHONE: (_____) _____ FAX: (_____) _____

WEBSITE: _____

IAAP MAIL SHOULD BE ADDRESSED TO: _____

Please copy and attach additional sheets if you want to include more persons or locations.

OFFICERS / STAFF	TITLE	EMAIL / TELEPHONE
		EMAIL: _____
		PHONE: ( )
		EMAIL: _____
		PHONE: ( )
		EMAIL: _____
		PHONE: ( )

PLANT LOCATIONS	ADDRESS	COUNTY	TELEPHONE
			(_____) _____
			FAX ( )
			(_____) _____
			FAX ( )
			(_____) _____
			FAX ( )

TYPE OF MINE: _____ OPEN CUT _____ UNDERGROUND

SHIPPING FACILITIES: _____ TRUCK _____ BARGE _____ RAIL

MINERAL / PRODUCT MINED: _____

OTHER PRODUCTS OR ADDITIONAL INFORMATION: _____

NAME OF PERSON / COMPANY ENCOURAGING YOU TO JOIN: _____

IAAP Dues Schedule

Annual Illinois Sales	Annual Dues
Less than $1,000,000.00	$500.00
$1,000,000.00 or greater	$1,000.00

Producers joining in the second quarter of the year pay 75% of the above schedule, third quarter 50%, last quarter 25%.
Membership dues are 95% tax deductible as a business expense.