



Please Return To:  
U.S. Ply, Inc.  
2000 E. Richmond  
Fort Worth, TX 76104

**APPLICATION FOR APPROVAL AS A  
U.S. PLY, INC. "USP 160 LICENSED APPLICATOR"**

I hereby apply for U.S. PLY, INC. USP 160 LICENSED APPLICATOR STATUS.

I have previously been a U.S. Ply, Inc. Certified Contractor     Yes                       No

**COMPANY NAME** \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Corporation     LLC     Partnership     Sole proprietor     DBA     Other

Years your firm has operated as a commercial roofing contractor? \_\_\_\_\_

Years your firm has been in business under its current name? \_\_\_\_\_

Years your firm has been in business under the present ownership? \_\_\_\_\_

**Principals of Company:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Name)

(Title)

**Areas of Operation** \_\_\_\_\_

(List general geographic area) \_\_\_\_\_

**Branch Offices** \_\_\_\_\_

\_\_\_\_\_

(Location)

(Address)

(Branch Mgr.)

**Annual Business Volume** \_\_\_\_\_ Squares or Dollar Volume \_\_\_\_\_

**Distribution of Work Type:** New \_\_\_\_%    Reroof \_\_\_\_%    Maintenance \_\_\_\_%

Other \_\_\_\_% Explain: \_\_\_\_\_

**Types of Membranes Applied –**

Conventional BUR	_____ %	SBS Mop	_____ %	Shingle	_____ %
Cold Process	_____ %	SBS Cold	_____ %	Tile/Shake	_____ %
APP Torch	_____ %	EPDM	_____ %	Metal	_____ %
SBS Torch	_____ %	PVC/TPO	_____ %	Other	_____ %

**Other Manufacturer's Approvals**

List all Roofing and Waterproofing Manufacturer's by whom you are currently certified or approved to apply guaranteed systems:

**Manufacturer**

**Certification Date**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_



# U.S. PLY, INC.

*Pioneered with performance in mind... Engineered to stand the test of time.*

## ROOFING ASSOCIATIONS / INDUSTRY INVOLVEMENT

National Roofing Contractors Association Member?  Yes  No

List any other national, regional or local associations that your firm is an active member:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**REFERENCES** List firms for whom your company has applied commercial roofing systems including Architects/specifiers, consultants, owners, general contractors, others:

### Modified Bitumen Roofing Systems:

	Firm Name	Contact	Phone #	Job Size
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

## FINANCIAL INFORMATION (List last 3 years Annual Business Volume (US Dollars))

Last Annual Business Volume \_\_\_\_\_ (US Dollars)

2<sup>nd</sup> Last Annual Business Volume \_\_\_\_\_ (US Dollars)

3<sup>rd</sup> Last Annual Business Volume \_\_\_\_\_ (US Dollars)

Has your firm been involved in any bankruptcy or reorganization proceedings?  Yes  No

(If yes, please explain): \_\_\_\_\_

\_\_\_\_\_

Has your firm changed ownership in the last three years?  Yes  No

(If yes, please explain): \_\_\_\_\_

\_\_\_\_\_

## INSURANCE – Check all applicable insurance coverage(s) for your business:

Worker's Compensation  General Liability  Employer's Liability

Auto/Vehicle  Other as appropriate: \_\_\_\_\_

*(Please attach insurance certificate verifying appropriate coverage)*

**CURRENT BONDING AGENT**

Bonding Company: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_

Bonding Agent: \_\_\_\_\_ Date Bonded: \_\_\_\_\_

Has your firm ever failed to complete a construction contract?       Yes       No

(If yes, please explain): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**SUPPLIER REFERENCES**

Company: \_\_\_\_\_ Contact: \_\_\_\_\_

Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Company: \_\_\_\_\_ Contact: \_\_\_\_\_

Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Company: \_\_\_\_\_ Contact: \_\_\_\_\_

Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

**APPLICATION INSTRUCTIONS/TRAINING**

My field supervisory and installation crews will be made available for training as required to maintain proficiency in the application of U.S. Ply, Inc.'s "USP APP & SBS 160 MODIFIED BITUMEN" Roofing Systems.

I understand that this application is for the purpose of evaluating my firm for a license as a U.S. Ply, Inc. USP 160 LICENSED APPLICATOR. Approval as an USP 160 LICENSED APPLICATOR is based upon satisfactory fulfillment of all necessary program qualification requirements. This application is valid for 6 months. If I have not been approved as an USP 160 LICENSED APPLICATOR by that time this application must be renewed.

**USP 160 LICENSED APPLICANT**

**U.S. PLY, INC.**

*Applicant*

*Approvals*

*Date*

Principal Name: \_\_\_\_\_

Sales Rep: \_\_\_\_\_

Principal Title: \_\_\_\_\_

Tech Manager: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Enclosures -      Financial Statement: \_\_\_\_\_  
                         Insurance Certificate: \_\_\_\_\_  
                         Other: \_\_\_\_\_

160 MB Systems \_\_\_\_\_ *Date Approved*

**U.S. PLY, INC.**  
**160 LICENSED APPLICATOR AGREEMENT**

We agree that, after the signing of this agreement as set forth below and subject to successfully completing all qualification requirements, you, ("the Contractor") will be deemed a U.S. PLY, INC., ("the Company") USP 160 LICENSED APPLICATOR. License for APP 160 & SBS 160 Modified Bitumen Systems are based upon satisfactory qualification in the application of both types of systems. As an USP 160 LICENSED APPLICATOR, you will be entitled to apply to the Company for the issuance of U.S. PLY, INC. applicable term length (see below – contractor benefits) USP APP & SBS "160" Material Warranty and/or applicable term length (see below – contractor benefits) "160" Roofing System Limited Warranties. U.S. PLY, INC. reserves the right to refuse to issue any such warranty when its written specifications and recommendations are not followed or if you do not comply with your obligations under this License Agreement.

**U.S. PLY, INC. USP 160 LICENSED APPLICATOR BENEFITS:**

As an USP 160 LICENSED APPLICATOR, you will be entitled to:

1. Apply for issuance of U.S. Ply, Inc. "10 Year USP 160 Roofing System Limited Warranties subject to compliance with applicable installation and guarantee issuance requirements.
2. Apply for issuance of U.S. PLY, INC. 10 Year Material Only Warranties, when using U.S. PLY, INC. USPTM APP 160 or USPTM SBS 160 modified bitumen membranes.

As a U.S. PLY, INC. USP 160 LICENSED APPLICATOR, Contractor agrees to fulfill certain obligations and responsibilities as described hereunder:

1. Contractor does hereby certify that we have read and fully understand the USP APP & SBS 160 Modified Bitumen Roofing Specifications and agree to meet or exceed the application criteria and requirements outlined therein.
2. Contractor agrees to notify Company in a timely fashion of your need for a U.S. PLY, INC. warranty, to provide us with the required documentation, and pay the applicable warranty and/or inspection fee(s) as detailed in our warranty procedure guidelines which have been separately provided to you.
3. Contractor agrees that on any roof for which you will seek a U.S. PLY, INC. warranty, you will perform your work in a skilled and workmanlike manner and will apply the Company's products in strict conformity to the procedures, specifications and recommendations detailed in the most current U.S. PLY, INC. "USP APP & SBS 160" Modified Bitumen roofing specifications at the time of application.
4. Should the Company so desire, Contractor will permit U.S. PLY, INC. or its designated representative to inspect the roof application and take samples during or shortly after application. You agree to promptly correct at your expense any instances or methods of your improper installation including failure to apply the Company's products in strict conformity with the Company's specifications that U.S. PLY, INC. or its designated representative may bring to your attention.
5. Contractor agrees to be responsible for any repairs that may be necessary as a result of your improper installation including installation which is not in strict conformity with the Company's specifications as to which complaints are made or inspections reveal to be necessary, within the warranty period after the completion of the roof, except as set forth in paragraph six (6). These repairs include, but are not limited to, places where the membrane or roof surfacing has not remained in place and any slippage or buckling of the flashings.
6. Contractor understands, and Company agrees, that neither the inspection(s) by U.S. PLY, INC. or its designated representative, of a roof application, nor the issuance by U.S. PLY, INC. of a guarantee for that roof, in any way, relieves you of your obligations and responsibilities to perform your work in a skilled and workmanlike manner and to apply the Company's products in strict conformity to the procedures, specifications and recommendations detailed in U.S. PLY, INC.'s most current specification manual. Contractor also agrees to indemnify and hold the Company harmless from any liability or expense which the Company may incur on account of your negligence or failure to perform your obligations hereunder.
7. Company agrees and you hereby acknowledge that at all times you are and will be functioning as an independent contractor, and that you are neither an agent nor legal representative of U.S. PLY, INC. for any purpose whatsoever. Contractor further agrees that you have no express or implied right or authority to assume or create any obligation or responsibility for or on behalf of the Company or to bind U.S. PLY, INC. in any manner. This agreement shall remain in force for one (1) year and shall automatically renew itself upon the same terms and conditions unless notified in writing by U.S. Ply, Inc. Further, U.S. Ply reserves the right to revoke this USP 160 License Applicator Agreement at any time and for any reason U.S. Ply, Inc. deems necessary, effective 30 days after U.S. Ply gives written notice. Any cancellation does not, however, relieve either Contractor or U.S. PLY, INC. of its obligations under any warranty issued prior to cancellation.

This agreement will not be effective until the "Accepted and Agreed" line below has been executed by an authorized corporate representative of U.S. PLY, INC.

**Accepted and Agreed**

**Accepted and Agreed**  
**U.S. PLY, INC.**

\_\_\_\_\_  
(Applicant's Firm Name)

By: \_\_\_\_\_

By: \_\_\_\_\_

Title: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**Agreement must be signed by an officer of the company.**