

GENERAL CONTRACTOR

Contact Name _____

Principal/Owner Name _____

Company Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email Address _____

Website Address _____

1. My application is endorsed by the following ARM member:

2. I understand that my designation is contingent upon my membership in the ICFA and my adherence to the ICFA Code of Ethics and Standards and Practices.

3. I am licensed by the State of Minnesota. My license number is:

4. I have successfully completed construction on a minimum of three (3) ICF homes. The homes are located at:

a. _____

b. _____

c. _____

5. I agree that to retain the Concrete Home Specialist designation, at least three (3) homes or a minimum of 50% of my annual production must be ICF construction.

6. I understand that my application's acceptance is subject to approval by ARM's ICF Committee.

Signed (General Contractor) _____ Date _____

Signed (ARM Member) _____ Date _____



Return completed application to:



12300 Dupont Avenue South Burnsville, MN 55337

952.707.1250 (P) - 952.707.1251 (F)

info@armofmn.com - www.ChooseConcrete.com - www.armofmn.com

ICF INSTALLER

Contact Name _____

Principal/Owner Name _____

Company Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email Address _____

Website Address _____

1. My application is endorsed by the following ARM member.

2. I have successfully completed a training course sponsored by the following ARM member:

Date of Completion _____

3. I understand that my designation is contingent upon my membership in the ICFA and my adherence to the ICFA Code of Ethics and Standards and Practices.

4. I have successfully completed construction on a minimum of three (3) ICF homes. The homes are located at:

a. _____

b. _____

c. _____

5. I understand that my application's acceptance is subject to approval by ARM's ICF Committee.

Signed (Installer) _____ Date _____

Signed (ARM Member) _____ Date _____

Return completed application to:



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