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### **Plan Room Policy**

The plan room is a valuable service to members of The Builders Exchange and is available for use by every member company. It is requested that each person using the plan room respect the rights and needs of all members. To help insure that maximum value from this service accrues to all members, the following common sense guidelines for plan room use have been established.

The plan room is open weekdays from 8:00 am to 5:00 pm except on legal holidays. Persons using the plan room must be employed on the permanent staff of a WBE member. Each person entering the plan room must sign the plan room register. Persons not signing the register will be denied use of the facilities. Plan room privileges will be suspended or revoked for any member not in good standing financially with WBE, or whose representatives abuse the plan room use. The plan room facilities are designed to provide reasonable plan services, and are not designed to accommodate full-time use for estimating and the transaction of business.

If plans are defaced or mutilated deliberately by an estimator, the estimator will be responsible to defray the complete cost of reprinting the set of plans. Further, upon evidence of deliberate defacing or mutilation, the estimator and his firm will be suspended from all plan room services. Marks, checks or figures placed on the drawings or specifications must be erased prior to returning them to the rack. All plans and specifications must be returned to the proper rack when not in use. An individual should review only one set of plans at a time and activities should be limited to one table. While no time limit is set for which an individual may use a set of plans, courtesy is expected and should be used. Plans and specifications cannot be reserved for use in the plan room during office hours or for the removal from the plan room during office hours. Anyone removing plans or specifications from the plan room without authorization will have their plan room privileges revoked until membership suspension is considered by WBE.

### **PAYMENT/TERMINATION OF SERVICES**

Subscriptions are based on annual payments and are non-refundable. Renewal Subscriptions are billed 30 days prior to due date. During the first 30 days of subscription, users will be required to pay for services and products in full. Subscription services and products will be terminated if accounts become past due. The Wausau Builders Exchange LLC reserves the right to terminate service for non-payment of subscription or outstanding balances charged by the applicant firm.

The applicant firm, \_\_\_\_\_, agrees to abide by the user agreement and planroom rules outlined in this application.

\_\_\_\_\_  
Signature of Company Representative

\_\_\_\_\_  
Date

<b>Full Membership</b> view bidlist and view and order drawings online, full use of Plan Room	<b>\$495 Annual</b>
<b>Basic</b> view bidlist only	<b>\$200 Annual</b>
<b>Plan Room Only</b>	<b>\$375 Annual</b>
<b>WBE/BXWI Bundled Service</b>	<b>\$1795 Annual</b>
<b>Additional Password</b> for key personnel	<b>\$50 Each</b>
<i>(Sharing passwords is PROHIBITED and cause for membership suspension)</i>	
<b>TOTAL COST</b>	<b>\$</b>

- Architect/Engineer     
  General Contractor     
  Subcontractor     
  Supplier     
  Service

APPLICANT FIRM	
PRIMARY CONTACT FOR BID INFORMATION	EMAIL

*Providing your e-mail address acknowledges your agreement to receive e-mail messages from WBE*

KEY PERSONNEL		
NAME	TITLE	EMAIL

BILLING ADDRESS		
CITY	STATE	ZIP+ 4

PHONE	FAX	WEBSITE ADDRESS
(    )	(    )	http://
(    )		

PHYSICAL ADDRESS <i>(if different than above)</i>		
CITY	STATE	ZIP+ 4

TRADE SPECIALTIES

MEMBERSHIPS
<input type="checkbox"/> ABC
<input type="checkbox"/> AGC
<input type="checkbox"/> WABA
<input type="checkbox"/> CWCA <input type="checkbox"/> Other

YEAR ESTABLISHED
MINORITY CONTR
<input type="checkbox"/> YES <input type="checkbox"/> NO

**REFERENCES**

Each applicant firm for services offered by the Wausau Builders Exchange LLC, must provide banking and credit information prior to approval of service. One credit reference must be a banking institution with which your firm does regular business. The remaining three may be any commercial firm to which you have, or may have had, credit of payments for various goods and/or services. Telephone numbers and points of contact will expedite the processing of this application.

**BANKING INSTITUTION**

BANK					
ACCOUNT NO					
ADDRESS					
CITY		State		Zip	
PHONE		FAX			

**COMMERCIAL FIRM #1**

COMPANY					
ACCOUNT NO					
ADDRESS					
CITY		State		Zip	
PHONE		FAX			

**COMMERCIAL FIRM #2**

COMPANY					
ACCOUNT NO					
ADDRESS					
CITY		State		Zip	
PHONE		FAX			

**COMMERCIAL FIRM #3**

COMPANY					
ACCOUNT NO					
ADDRESS					
CITY		State		Zip	
PHONE		FAX			

*Submit Completed Forms with Payment to:*

**Wausau Builders Exchange LLC**  
 4405 Stewart Avenue, Suite A  
 Wausau, WI 54401

Ph: 715-848-0001 Fax: 715-848-8707

e-mail: [planroom@wausaubex.com](mailto:planroom@wausaubex.com)

TO NAMED CREDIT REFERENCES:

My signature below authorizes the release of credit information for use in the evaluation of my application for membership and services in The Wausau Builders Exchange LLC.

\_\_\_\_\_  
 Authorized Signature of Applicant Firm

\_\_\_\_\_  
 Date

We hereby give the Wausau Builders Exchange LLC express written permission to conduct facsimile and/or electronic communication, whenever necessary, with our firm for construction news and industry related business.

COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PO BOX: \_\_\_\_\_ - \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ - \_\_\_\_\_

PHONE: (    ) \_\_\_\_\_ FAX: (    ) \_\_\_\_\_

Authorized Name: \_\_\_\_\_ Date: \_\_\_\_\_

Please Print

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

Compliance form for FCC "Do Not Fax" Rule for Established Business Relationships  
(Effective Date: July 1, 2005)  
Cost-free "Opt Out" at anytime Phone Line: 1-866-367-2994

Please cut this document and return the upper portion to WBE / Lower portion is for your own company records.



**Wausau Builders Exchange LLC**  
4405 Stewart Avenue, Suite A  
Wausau, WI 54401

The WBE hereby gives express written permission for

\_\_\_\_\_  
Type, Stamp, or Print Your Company Name Here

to conduct facsimile and/or electronic communication to our firm for construction news and industry related business.

WBE Inc. Authorized Representative: Michael Williams, president

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

President