

Professional Logging Contractors of the Northeast

Contractor Member Application

Contact: _____

Company Name: _____

Mailing Address: _____

City: _____

State/Province: _____ ZIP/Postal Code: _____

Physical Address: _____

Office Phone: _____

Cell Phone: _____

Email: _____

Additional E-mails for Weekly emails:

Web site: _____

1. Federal Tax ID # _____ Yes _____ No

2. Unemployment Insurance Account Number? _____ Yes _____ No

3. Workers' Compensation Policy? _____ Yes _____ No

** PLC policy is that Members must have a current workers comp. insurance policy. However, affiliated sole proprietor applicants may also qualify for membership if they do not have a current policy by being Master Logger Certified® company. (Your insurance agent will have the information below)*

Workers Comp. Agency: _____

Workers Comp. Underwriter: _____

Workers Comp. Mod. Rating: _____

4. Do you have a current General Liability Insurance Policy? _____ Yes _____ No

General Liability Agency: _____

General Liability Underwriter: _____

5. Current number of employees: _____

6. Is your company third-party certified and/or do your employees participate in a logger training program (please check all that apply):

____ Northeast Master Logger Program

____ Certified Logging Professional Program

____ Qualified Logging Professional Program

____ LEAP Trained

____ Other _____



7. Does your company have a written safety program on file that is updated annually? Yes No
(PLC NE members must have a written safety program on file as a condition of membership. The PLC NE will provide sample safety plans to assist with this process.)

8. Does your company conduct workplace safety inspections with a third party? Yes No

9. Has your company violated the standards of the State Forest Practices Act or had civil violations (i.e. timber theft or trespass) within the past five years? If yes, please explain. Yes No

10. During the past 12 months, have there been any significant changes in your company? If yes, please explain.

11. If your company has Acadia Insurance, would your company like to participate in the **2024 PLC/ Acadia Insurance Dividend Group**? (*participation in the Dividend Group is subject to underwriting approval by Acadia Insurance)

Yes - (if your answer is yes, please proceed to question 12.)

No - (if your answer is no, please proceed to question 13.)

12 Acadia Confidentiality Waiver- As a condition of participation in the PLC/Acadia Insurance Dividend Group, Acadia Insurance requires the PLC NE to obtain a signed confidentiality waiver from each participating company. On behalf of ("Company"), as a member of the PLC/Acadia Insurance Dividend Program, I hereby authorize Acadia Insurance and/or its appointed agents to release information relating to my insurance policies with Acadia Insurance, including but not limited to premiums and loss history, to the Executive Director of the PLC. The Executive Director of the PLC will keep this information confidential and will not share company specific information with the Executive Board, Full Board, or individual members of the PLC. I acknowledge and agree that the fore- going authorization will remain valid as long as the Company remains a member of the PLC and the PLC/Acadia Insurance Dividend program, unless expressly revoked in writing to Acadia Insurance and the PLC. The undersigned certifies that he/she is duly authorized to sign this authorization on behalf of the Company.

Signature: _____ *Signature required to participate in dividend program.*

Printed Name _____

All PLC/Acadia dividend program members and their employees are strongly encouraged to attend PLC Safety training annually.

Questions? Call 207-688-8195 opt. 1

13. PLC Code of Practice: (All PLC members must sign)

It is understood that all members of the PLC will adhere to its "Code of Practice". As a professional contractor, I will strive to operate in such a way as to engender the public's trust including meeting or exceeding the standards and principles as follows:

- Promote ethical conduct.
- Strive to always meet standards for harvesting practices, (if applicable) which are consistent with the principles of sustainable forestry.
- To operate responsibly in all phases of the business operation.
- Recognizing private landowner rights, I will strive to meet the landowner's objectives if they are consistent with sustainable forestry principles, federal, state and local laws.
- I will do all I can to educate and inform landowners, loggers, and others about the need to meet responsible forestry principles.
- I will participate in the Northeast Master Logger, Certified Logging Professional, Qualified Logging Professional or other third party recognized program that will provide me with recognition as having met the appropriate requirements for my company.
- Comply with all federal, state, and local laws and regulations, industry standards and guidelines applicable to the conduct of business operations.
- Conduct harvest operations in a safe manner which follow Occupational Safety and Health Administration (OSHA) regulations including safety planning and all provisions of such requirements.
- To operate my company profitably as a responsible member of the business community including compliance with all requirements and practices as they relate to my employees, vendors, and others I do business with.
- Continually strive to maintain positive relationships with landowners, procurement and mill personnel and the public in general.
- Do my part to assure that my industry has a positive image and to work with peer groups, trade associations and others to strive to bring all contractors up to these standards.
- Strive to continually improve my operations through training, innovation, employee programs and other appropriate means.
- Act responsibly to uphold the integrity of the logging profession.

Printed Name: _____

Signature required: _____ Company: _____

Title: _____ Date: _____

Operational Data: (please complete any that apply)

of harvesting crews: ____ Whole Tree Mechanical ____ Cut to Length Mechanical ____ Conventional

Equipment Inventory

Skidder:	# ____ cable	# ____ grapple
Feller buncher:	# ____ track	# ____ rubber tire
Harvester:	# ____ 6 wheel	# ____ 8 wheel # ____ Tracked
Forwarder:	# ____ over 18 ton	# ____ under 18 ton
Delimber:	# ____ stroke	# ____ pull through
Trucking:	# ____ in-house	# ____ contracted
# of Trucks:	6 Axle log truck/trailers ____	6 Axle Truck/Chip Van ____ Wheeler ____

Estimated Total Tons Harvested and/or trucked in 2023: _____

2024 Membership Type (choose one):

Logging Contractor - responsible for stump to roadside –business is primarily engaged in timber harvesting, eligible for Board Membership, voting member, insurance dividend eligible.* 2024 Membership dues are based on estimated 2023 production (tons produced 1/1/23 – 12/31/23) Please check the line that applies to your company.

- 25,000 tons & under: \$250; \$200 if Master Logger Certified
- 25,001 to 50,000 tons: \$500; \$400 if Master Logger Certified
- 50,001 to 100,000 tons: \$750; \$650 if Master Logger Certified
- 100,001+ tons: \$1000; \$900 if Master Logger Certified

Affiliated Contractor - not responsible for stump to roadside, except for sole proprietor without workers comp. insurance (must be Master Logger certified), owner-operator/sub-contractor, chipping contractor, grinding contractor, slashing contractor or chip mill – voting member, insurance dividend eligible*, not eligible for Board Membership. 2024 Membership dues are based on estimated 2023 production (tons produced 1/1/23 – 12/31/23) Please check the line that applies to your company.

- 25,000 tons & under: \$250; \$200 if Master Logger Certified
- 25,001 to 50,000 tons: \$500; \$400 if Master Logger Certified
- 50,001 to 100,000 tons: \$750; \$650 if Master Logger Certified
- 100,001+ tons: \$1000; \$900 if Master Logger Certified

Forest Contractor - Trucking Only or Forest Road Construction: 50% or more of business is from forest activities – voting member, insurance dividend eligible*, not eligible for Board Membership. 2024 Membership dues are based on 2023 data (number of employees 1/1/23 – 12/31/23) Please check the line that applies to your company.

- 0-2 employees: \$100
- 3-5 employees: \$250
- 6-10 employees: \$500
- 11+ employees: \$750

2024 Dues - We understand PLC's honor system is based on the membership level as set forth by the PLC Board of Directors on and that any member found not paying fairly for 2023 will be assessed back dues.

2024 Dues Amount: _____

Log A Load Donation - Please accept my additional donation on behalf of the Log A Load for Kids program. Contributions will be distributed equally between Children's Miracle Network Hospitals that we are affiliated with. 2024 Donation Amount: \$ _____

Payment Options:

- Check enclosed
- To pay by credit card or bank transfer - please check here and we will email you a secure link.
- I will mail a check to: Professional Logging Contractors of the NE, P.O. Box 1036, Augusta, ME 04332



Please send complete applications and payment to:

mail: Professional Logging Contractors of the NE, P.O. Box 1036, Augusta, ME 04332

email: office@plcloggers.org

fax: 207-620-7517