



SCTA Membership Application For-Hire Carrier

For Companies operating trucks with "For-Hire" Authority

MAIN COMPANY CONTACT

Please Complete All Fields and Print Clearly

Company Name				SIC Code	
CEO/Owner		Title		Email	
Billing/Newsletter & Mailings Contact <i>(If different from CEO/Owner)</i>		Title		Email	
Mailing Address		City	State	Zip	County
Shipping/Street Address		City	State	Zip	County
Phone	Cell	Fax		Website	

ADDITIONAL COMPANY CONTACTS

Name	Title	Email	Phone/Cell	Fax
Name	Title	Email	Phone/Cell	Fax

Preferred Method of Communication for Information and Publications: Email Fax

COMPANY INFORMATION

For Hire Carrier (Intrastate or Interstate) Number of trucks: 10,001+ GVWR _____ 26,001+ GVWR _____

Number of Trucks	DOT#	Number of SC Employees	Number of SC Terminals
------------------	------	------------------------	------------------------

EQUIPMENT USED:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Auto Hauler | <input type="checkbox"/> Step Deck | <input type="checkbox"/> Straight Truck | <input type="checkbox"/> Tank |
| <input type="checkbox"/> Dump | <input type="checkbox"/> Cement Mixer | <input type="checkbox"/> Drayage/Chassis/Intermodal | <input type="checkbox"/> Dry Van/Open Top |
| <input type="checkbox"/> Lowboy | <input type="checkbox"/> Extendable | <input type="checkbox"/> Heavy Haul | <input type="checkbox"/> Logger- Log Trailers |
| <input type="checkbox"/> Sprinter/Cargo Van Other:
(Specify) _____ | <input type="checkbox"/> Reefer/Refrigerated | <input type="checkbox"/> Rollup | <input type="checkbox"/> Specialized |
| <input type="checkbox"/> Boat Hauler | <input type="checkbox"/> Step Van | <input type="checkbox"/> Stretch | <input type="checkbox"/> Wood Chip |
| <input type="checkbox"/> Earthmover | <input type="checkbox"/> Conestoga (Curtain Side) | <input type="checkbox"/> Dry Van/Enclosed | |
| <input type="checkbox"/> Mobile Home | <input type="checkbox"/> Flat Bed | <input type="checkbox"/> Livestock | |
| | <input type="checkbox"/> Removeable Gooseneck | <input type="checkbox"/> Sidekit | |

COMMODITY:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Agricultural Goods | <input type="checkbox"/> General Freight | <input type="checkbox"/> Mobile Homes | <input type="checkbox"/> Textiles |
| <input type="checkbox"/> Forest Products | <input type="checkbox"/> Intermodal Freight | <input type="checkbox"/> Rock, Sand, Gravel, Soil | <input type="checkbox"/> Food Products |
| <input type="checkbox"/> Household Goods | <input type="checkbox"/> Refrigerated | <input type="checkbox"/> Cement Hauler | <input type="checkbox"/> Heavy Hauling/Machinery |
| <input type="checkbox"/> Petroleum Products | <input type="checkbox"/> Bulk Commodities | <input type="checkbox"/> Hazardous Waste | <input type="checkbox"/> Paper |
| <input type="checkbox"/> Building Materials | <input type="checkbox"/> Hazardous Material | <input type="checkbox"/> Motor Vehicles | <input type="checkbox"/> Other: _____ |

Please send me information about the following SCTA Affinity Programs:

- | | | |
|---|---|--|
| <input type="checkbox"/> SCTA Insurance Services Unit – Full line of health and life insurance benefits |  | <input type="checkbox"/> PrePass – Weigh Station By-Pass Services |
| <input type="checkbox"/> In init-i – Online training and educational courses |  | <input type="checkbox"/> HireRight – Drug & Alcohol Testing Services |
| <input type="checkbox"/> UPS – Savings on Next Day Air and package services |  | <input type="checkbox"/> Advertising and Sponsorship Opportunities |



The Following Council Memberships are open to individuals whose company or employer is a member of SCTA.

SAFETY MANAGEMENT COUNCIL MEMBERSHIP

The Safety Management Council meets regularly to discuss issues of interest to truck fleet safety professionals. The council also works with groups all across South Carolina to spread the word that the trucking industry is concerned about safety, and that we are doing something positive about it. The council meets the 3rd Tuesday of each month.

Name	Title	Email	Phone	Fax
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MAINTENANCE COUNCIL MEMBERSHIP

The Maintenance Council meets monthly to learn and discuss efficient maintenance of truck fleets, hosting programs presented by engineers, field service managers and technicians representing manufacturers and suppliers of truck parts and equipment. The council meets the 2nd Tuesday of each month.

Name	Title	Email	Phone	Fax
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EMERGING LEADER COUNCIL MEMBERSHIP

The Emerging Leader Council facilitates leadership, personal and professional development opportunities for the next generation of up and coming management-level staff within your company.

Name	Title	Email	Phone	Fax
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DUES STRUCTURE

Basis for Dues: Include all trucks in fleet over 10,000 lbs. GVWR whether owned, leased, and including lease operators – all revenue generating units.

CARRIER WITH "FOR HIRE" OPERATING AUTHORITY BASED IN SC:

1-10 Trucks \$490.00
 More than 10 \$440.00 + 24.00 per each additional truck
 Maximum Dues: \$7,160.00

Calculate Your Annual Dues:

Total # of Trucks: _____

Trucks 1 – 10 \$440.00 + each additional truck (_____ x \$24.00) =
\$ _____

HOUSEHOLD GOODS CARRIER - MOVERS CONFERENCE MEMBER

Follows the for-hire dues structure
+ \$25.00 assessment to the Movers Conference Treasury

MEMBERSHIP INVESTMENT

DUES TOTAL (as noted above) \$ _____

I would like to make a voluntary contribution in the amount of \$50 / \$75 / \$100 / \$ _____ for **TruckPAC**

I would like to make a voluntary contribution in the amount of \$50 / \$75 / \$100 / \$ _____ to the **Road Team**

I would like to make a voluntary contribution in the amount of \$50 / \$75 / \$100 / \$ _____ for **Advocacy/PR**

PAYMENT TOTAL \$ _____

Payment Information (Please Print)

AmEx Discover MasterCard VISA Check (make payable to SCTA)

Card Number	Exp. Date	Security Code
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Cardholder Name	Cardholder Signature*	Date*
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*I authorize SCTA to charge my credit card for the payment total listed above.

How did you hear about us?

**Thank you for your membership! Please return completed applications to SCTA.
PO Box 50166 Columbia, SC 29250 or Fax to (803) 254-7148
Questions? Please call us! (803)799-4306**



SCTA Membership Application For-Hire Non-Domiciled

For Companies with "For-Hire" Authority, NOT BASED in South Carolina

MAIN COMPANY CONTACT

Please Complete All Fields and Print Clearly

Company Name			SIC Code	
CEO/Owner	Title	Email		
Billing/Newsletter & Mailings Contact <i>(If different from CEO/Owner)</i>	Title	Email		
Mailing Address	City	State	Zip	County
Shipping/Street Address	City	State	Zip	County
Phone	Cell	Fax	Website	

ADDITIONAL COMPANY CONTACTS

Name	Title	Email	Phone/Cell	Fax
Name	Title	Email	Phone/Cell	Fax

Preferred Method of Communication for Information and Publications:

Email

Fax

COMPANY INFORMATION

Number of trucks: 10,001+ GVWR _____ 26,001+ GVWR _____

Number of Trucks	DOT#	Number of SC Employees	Number of SC Terminals
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Please List All Locations in SC: _____

EQUIPMENT USED:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Auto Hauler | <input type="checkbox"/> Step Deck | <input type="checkbox"/> Straight Truck | <input type="checkbox"/> Tank |
| <input type="checkbox"/> Dump | <input type="checkbox"/> Cement Mixer | <input type="checkbox"/> Drayage/Chassis/Intermodal | <input type="checkbox"/> Dry Van/Open Top |
| <input type="checkbox"/> Lowboy | <input type="checkbox"/> Extendable | <input type="checkbox"/> Heavy Haul | <input type="checkbox"/> Logger- Log Trailers |
| <input type="checkbox"/> Sprinter/Cargo Van Other:
(Specify) _____ | <input type="checkbox"/> Reefer/Refrigerated | <input type="checkbox"/> Rollup | <input type="checkbox"/> Specialized |
| <input type="checkbox"/> Boat Hauler | <input type="checkbox"/> Step Van | <input type="checkbox"/> Stretch | <input type="checkbox"/> Wood Chip |
| <input type="checkbox"/> Earthmover | <input type="checkbox"/> Conestoga (Curtain Side) | <input type="checkbox"/> Dry Van/Enclosed | |
| <input type="checkbox"/> Mobile Home | <input type="checkbox"/> Flat Bed | <input type="checkbox"/> Livestock | |
| | <input type="checkbox"/> Removeable Gooseneck | <input type="checkbox"/> Sidekit | |

COMMODITY:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Agricultural Goods | <input type="checkbox"/> General Freight | <input type="checkbox"/> Mobile Homes | <input type="checkbox"/> Textiles |
| <input type="checkbox"/> Forest Products | <input type="checkbox"/> Intermodal Freight | <input type="checkbox"/> Rock, Sand, Gravel, Soil | <input type="checkbox"/> Food Products |
| <input type="checkbox"/> Household Goods | <input type="checkbox"/> Refrigerated | <input type="checkbox"/> Cement Hauler | <input type="checkbox"/> Heavy Hauling/Machinery |
| <input type="checkbox"/> Petroleum Products | <input type="checkbox"/> Bulk Commodities | <input type="checkbox"/> Hazardous Waste | <input type="checkbox"/> Paper |
| <input type="checkbox"/> Building Materials | <input type="checkbox"/> Hazardous Material | <input type="checkbox"/> Motor Vehicles | <input type="checkbox"/> Other: _____ |

Please send me information about the following SCTA Affinity Programs:

SCTA Insurance Services Unit – Full line of health and life insurance benefits



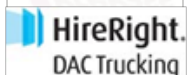
PrePass – Weigh Station By-Pass Services



In init-i – Online training and educational courses



HireRight – Drug & Alcohol Testing Services



UPS – Savings on Next Day Air and package services



Advertising and Sponsorship Opportunities

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SAFETY MANAGEMENT COUNCIL MEMBERSHIP

The Safety Management Council meets regularly to discuss issues of interest to truck fleet safety professionals. The council also works with groups all across South Carolina to spread the word that the trucking industry is concerned about safety, and that we are doing something positive about it. The council meets the 3rd Tuesday of each month.

Name	Title	Email	Phone	Fax
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EMERGING LEADER COUNCIL MEMBERSHIP

The Emerging Leader Council facilitates leadership, personal and professional development opportunities for the next generation of up and coming management-level staff within your company.

Name	Title	Email	Phone	Fax
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DUES STRUCTURE

Basis for Dues: For Hire Carriers Not Based in SC - Mileage Basis: Dues based on actual IRP or fuel tax mileage reported to SC.

Mi./Yr. (Millions)	Annual Dues		
Up to 1 (minimum).....	\$490.00	Over 11 to 12.....	\$2,210.00
Over 1 to 2.....	\$600.00	Over 12 to 13.....	\$2,340.00
Over 2 to 3.....	\$830.00	Over 13 to 14.....	\$2,460.00
Over 3 to 4.....	\$1,030.00	Over 14 to 15.....	\$2,570.00
Over 4 to 5.....	\$1,190.00	Over 15 to 16.....	\$2,680.00
Over 5 to 6.....	\$1,380.00	Over 16 to 17.....	\$2,800.00
Over 6 to 7.....	\$1,520.00	Over 17 to 18.....	\$2,900.00
Over 7 to 8.....	\$1,640.00	Over 18 to 19.....	\$3,030.00
Over 8 to 9.....	\$1,780.00	Over 19 to 20.....	\$3,160.00
Over 9 to 10.....	\$1,960.00	Over 20 to 25.....	\$3,920.00
Over 10 to 11.....	\$2,070.00	Over 25.....	\$4,600.00
		Maximum Dues.....	\$4,600.00 per year

MEMBERSHIP INVESTMENT

DUES TOTAL (as noted above) \$ _____

I would like to make a voluntary contribution in the amount of \$50 / \$75 / \$100 / \$ _____ for **TruckPAC**

I would like to make a voluntary contribution in the amount of \$50 / \$75 / \$100 / \$ _____ to the **Road Team**

I would like to make a voluntary contribution in the amount of \$50 / \$75 / \$100 / \$ _____ for **Advocacy/PR**

PAYMENT TOTAL \$ _____

Payment Information (Please Print)

- AmEx Discover MasterCard VISA Check (make payable to SCTA)

Card Number	Exp. Date	Security Code
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Cardholder Name	Cardholder Signature*	Date*
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SCTA Membership Application Allied Industry

For companies that do not run trucks but provide goods or services to the industry

MAIN COMPANY CONTACT

Please Complete All Fields and Print Clearly

Company Name			SIC Code	
CEO/Owner	Title		Email	
Billing/Newsletter & Mailings Contact <i>(If different from CEO/Owner)</i>			Email	
Mailing Address	City	State	Zip	County
Shipping/Street Address	City	State	Zip	County
Phone	Cell	Fax	Website	

ADDITIONAL COMPANY CONTACTS

Name	Title	Email	Phone/Cell	Fax
Name	Title	Email	Phone/Cell	Fax

Preferred Method of Communication for Information and Publications:

Email

Fax

COMPANY OPERATIONS:

- State - Company based and doing business ONLY in South Carolina.
- National - Company doing business regionally or nationally.

TYPE OF COMPANY / SERVICES OFFERED:

- | | | |
|--|--|--|
| <input type="checkbox"/> Accountant | <input type="checkbox"/> Equipment Manufacturer | <input type="checkbox"/> Truck Repair |
| <input type="checkbox"/> Advertising/Publishing | <input type="checkbox"/> Financial Services | <input type="checkbox"/> Tire Dealer/Manufacturer |
| <input type="checkbox"/> Attorney | <input type="checkbox"/> Insurance | <input type="checkbox"/> Trailer Dealer/Manufacturer |
| <input type="checkbox"/> Communications | <input type="checkbox"/> Legal | <input type="checkbox"/> Truck Dealer/Manufacturer |
| <input type="checkbox"/> Engines | <input type="checkbox"/> Medical/Drug & Alcohol Services | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Equipment/Vehicle Leasing | <input type="checkbox"/> Truckstops | |

COMPANY LOGO:

E-mail us your company logo to keep on file in case your company decides to host or sponsor an SCTA event. Please send a high quality (300 dpi or better) eps, tiff, or jpeg file to taryn@sctrucking.org to keep on-hand. Thanks in advance!

Please send me information about the following SCTA Affinity Programs:

- SCTA Insurance Services Unit – Full line of health and life insurance benefits
- Infit-i – Online training and educational courses
- UPS – Savings on Next Day Air and package services
- PrePass – Weigh Station By-Pass Services
- HireRight – Drug & Alcohol Testing Services
- Advertising and Sponsorship Opportunities



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Name Title Email Phone Fax

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The Maintenance Council meets monthly to learn and discuss efficient maintenance of truck fleets, hosting programs presented by engineers, field service managers and technicians representing manufacturers and suppliers of truck parts and equipment. The council meets the 2nd Tuesday of each month.

Name Title Email Phone Fax

DUES STRUCTURE

Basis for Dues: Dues are based on company operations

<input type="checkbox"/> Allied State	\$550.00	<input type="checkbox"/> Allied National	\$800.00
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MEMBERSHIP INVESTMENT

DUES TOTAL (as noted above) \$ _____

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I would like to make a voluntary contribution in the amount of \$50 / \$75 / \$100 / \$ _____ to the **Road Team**

I would like to make a voluntary contribution in the amount of \$50 / \$75 / \$100 / \$ _____ for **Advocacy/PR**

PAYMENT TOTAL \$ _____

Payment Information (Please Print)

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Card Number Exp. Date Security Code

Cardholder Name Cardholder Signature* Date*

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Questions? Please call us! (803)799-4306**



SCTA Membership Application Private Carrier

For companies operating their own "Private" fleet of trucks and Leasing Companies

MAIN COMPANY CONTACT

Please Complete All Fields and Print Clearly

Company Name				SIC Code	
CEO/Owner		Title		Email	
Billing/Newsletter & Mailings Contact <i>(If different from CEO/Owner)</i>		Title		Email	
Mailing Address		City	State	Zip	County
Shipping/Street Address		City	State	Zip	County
Phone	Cell	Fax	Website		

ADDITIONAL COMPANY CONTACTS

Name	Title	Email	Phone/Cell	Fax
Name	Title	Email	Phone/Cell	Fax

Preferred Method of Communication for Information and Publications:

Email

Fax

COMPANY INFORMATION

Private Carrier or Leasing Company (Have "For-Hire" Authority) Number of trucks: 10,001+ GVWR _____ 26,001+ GVWR _____

Number of Trucks	DOT#	Number of SC Employees	Number of SC Terminals
------------------	------	------------------------	------------------------

EQUIPMENT USED:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Auto Hauler | <input type="checkbox"/> Step Deck | <input type="checkbox"/> Straight Truck | <input type="checkbox"/> Tank |
| <input type="checkbox"/> Dump | <input type="checkbox"/> Cement Mixer | <input type="checkbox"/> Drayage/Chassis/Intermodal | <input type="checkbox"/> Dry Van/Open Top |
| <input type="checkbox"/> Lowboy | <input type="checkbox"/> Extendable | <input type="checkbox"/> Heavy Haul | <input type="checkbox"/> Logger- Log Trailers |
| <input type="checkbox"/> Sprinter/Cargo Van Other:
(Specify) _____ | <input type="checkbox"/> Reefer/Refrigerated | <input type="checkbox"/> Rollup | <input type="checkbox"/> Specialized |
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| <input type="checkbox"/> Mobile Home | <input type="checkbox"/> Flat Bed | <input type="checkbox"/> Livestock | |
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COMMODITY:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Agricultural Goods | <input type="checkbox"/> General Freight | <input type="checkbox"/> Mobile Homes | <input type="checkbox"/> Textiles |
| <input type="checkbox"/> Forest Products | <input type="checkbox"/> Intermodal Freight | <input type="checkbox"/> Rock, Sand, Gravel, Soil | <input type="checkbox"/> Food Products |
| <input type="checkbox"/> Household Goods | <input type="checkbox"/> Refrigerated | <input type="checkbox"/> Cement Hauler | <input type="checkbox"/> Heavy Hauling/Machinery |
| <input type="checkbox"/> Petroleum Products | <input type="checkbox"/> Bulk Commodities | <input type="checkbox"/> Hazardous Waste | <input type="checkbox"/> Paper |
| <input type="checkbox"/> Building Materials | <input type="checkbox"/> Hazardous Material | <input type="checkbox"/> Motor Vehicles | <input type="checkbox"/> Other: _____ |

Please send me information about the following SCTA Affinity Programs:

SCTA Insurance Services Unit – Full line of health and life insurance benefits



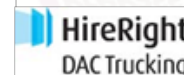
PrePass – Weigh Station By-Pass Services



Infnit-i – Online training and educational courses



HireRight – Drug & Alcohol Testing Services



UPS – Savings on Next Day Air and package services



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Name Title Email Phone Fax

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Name Title Email Phone Fax

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The Emerging Leader Council facilitates leadership, personal and professional development opportunities for the next generation of up and coming management-level staff within your company.

Name Title Email Phone Fax

DUES STRUCTURE

Basis for Dues: Include all trucks in fleet over 10,000 lbs. GVWR whether owned, leased, and including lease operators – all revenue generating units.

**PRIVATE CARRIERS & LEASING COMPANIES
(WITH NO "FOR-HIRE" OPERATING AUTHORITY)**

# of Trucks	Dues Amount	# of Trucks	Dues Amount
1-20	\$490.00	81-90	\$880.00
21-30	\$500.00	91-100	\$960.00
31-40	\$530.00	101-110	\$1040.00
41-50	\$570.00	111-120	\$1110.00
51-60	\$650.00	121-130	\$1190.00
61-70	\$730.00	131-140	\$1290.00
71-80	\$810.00	141-150	\$1340.00

MEMBERSHIP INVESTMENT

DUES TOTAL (as noted above) \$ _____

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I would like to make a voluntary contribution in the amount of \$50 / \$75 / \$100 / \$ _____ to the **Road Team**

I would like to make a voluntary contribution in the amount of \$50 / \$75 / \$100 / \$ _____ for **Advocacy/PR**

PAYMENT TOTAL \$ _____

Payment Information (Please Print)

AmEx Discover MasterCard VISA Check (make payable to SCTA)

Card Number Exp. Date Security Code

Cardholder Name Cardholder Signature* Date*

*I authorize SCTA to charge my credit card for the payment total listed above.

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