



Company Name (Applicant)			Month	Day	Year
Address			Contact Person		
City	State	Zip	Phone Number		
Phone Number			Email		

General organization

President	Branch Locations
Sales Manager	
Purchasing Manager	Primary Geographic States
Financial Officer	
Number of crews with your company	
GE Silicones distributor you buy from	Bonding: <input type="checkbox"/> Yes <input type="checkbox"/> No Amount \$ Company

Project experience	
Type of roof work	Percentage of work
New	
Repair	
Maintenance	
Coating	
Other:	

Customers served

Schools	Office
Manufacturing / warehouse	Retail
Government	Other

How long has your company been applying coatings? _____ years

What coating suppliers do you currently use?

Product experience		
	Years of experience	Percentage of work
Silicone		
Acrylic		
Single Ply		
Metal		
BUR		
Spray foam		
Other:		

Applicator experience & training			
Applicator Name	Experience level	Coating Application training— Sponsor & Year	OSHA hours

High profile jobs

Total square feet of coatings applied each year			
3 years ago	2 years ago	Last Year	Forecast for this year



Promotional activities		
	In the Past	Future Plans
Direct mailers		
End user seminars		
Tradeshows / associations		
Telemarketing		
Sales incentives / contests		
Advertising		
Other:		

Roofing related organizations:

Outstanding features of your organization (e.g., awards):

Applicant Signature, by _____ Month _____ Day _____ Year

Print Name _____ Title _____

Applicant is providing the above information to Momentive Performance Materials (MPM), the manufacturer of the GE Silicones line of products, for the sole purpose of determining Applicant's eligibility for Authorized Applicator status. Applicant understands that delivery of this application to MPM is just one component of qualification, and shall in no way be construed as granting Applicant rights of any kind, expressed or implied. Applicant authorizes MPM to obtain information from credit reporting organizations to evaluate Applicant's credit condition. It is further understood that in the event this application is approved by MPM, Applicant shall not be permitted to actively represent itself as an Authorized Applicator in the GE Silicones Roofing Program until the Authorized Applicator Agreement has been signed by both MPM and Applicant.

Return completed form to:

roofwarranties@momentive.com AND TO
Robert Creighton robert.creighton@momentive.com

THIS SECTION FOR MPM USE ONLY			
Required prior to approval	Month	Day	Year
Financial Submittal			
Credit Check			
Inspection of Previous Work			
Program Manager signature	Month	Day	Year