



NARI MEMBERSHIP APPLICATION

ELIGIBILITY for NARI membership requires that applicants be actively engaged in the remodeling industry for at least one full year prior to application. Applicants must conduct their business in compliance with the NARI Code of Ethics. Membership in NARI will be pending Board approval and an ethics review. Should membership be denied, the membership fee minus the application processing fee will be returned.

COMPANY INFORMATION

Company Name

Designated Representative

Title

Address

City State Zip

Telephone Cell phone

Fax Email

Web site Year company was established

Have you previously held NARI Membership?

No Yes When? _

Who recommended you to NARI?

Name

Co.

Additional staff to be included on the email distribution list for NARI Mid-Maryland information.

Name/Title

Email

Name/Title

Email

Name/Title

Email

Do any of the principals of the company operate or trade under any other name in the construction field?

NO YES (If yes, please attach an explanation to this application)

MEMBERSHIP CATEGORY (choose one)

- Local Remodeler (contractors and subcontractors)
- Local Vendor Vendors please specify:
___ Supplier/Manufacturer ___ Professional/Service

Indicate existing national or local membership:

- We are a local branch of a national firm that already has a NARI National Membership
- We are already a member of another local NARI Chapter (which one? _____)

What are your top three reasons for wanting to join NARI?

- Educational programs and resources
- Certification
- Regulatory information
- Networking
- Business referrals
- Supporting the industry
- Enhancing your company's reputation
- Other _____

ETHICS (all applicants)

Have you/your company ever been subject to disciplinary action by any state with respect to your license?

Any pending complaints?

- NO YES (If yes, please attach an explanation to this application)

Have there been formal complaints filed with any other trade associations against you/your company?

- NO YES (If yes, please attach an explanation to this application)

Are there any pending lawsuits against you/your company?

- NO YES (If yes, please attach an explanation to this application)

Have there been any judgments against you/your company in the last 5 years (including arbitrations)?

NO YES (If yes, please attach an explanation to this application)



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COMPANY INFORMATION

FEDERAL EMPLOYEE IDENTIFICATION NUMBER

EIN: _____

LICENSING AND CERTIFICATION

All applicants must provide type(s) and Number(s) of license(s) for applicable jurisdictions.

Contractors must provide appropriate contractor license information for each jurisdiction where they do work. Vendors must provide a general business licenses for each applicable jurisdiction.

DC Lic. Type _____ # _____

MD Lic. Type _____ # _____

VA Lic. Type _____ # _____

Please provide photocopies of license(s) with your application.

EPA Lead-Safe Certified Firm? Yes No

Certification #: _____ Exp. Date _____

INSURANCE

Liability insurance company _____

Policy # _____

COMPANY DATA

Please provide data from your company for LAST year.
(Information specific to your company will be kept in strict confidence)

Estimated Gross Revenue _____

Estimated Marketing/Advertising budget _____

Number of employees (FTEs) _____

Number of Projects _____

Estimated \$ Volume of Subcontracted work _____

Will you be hiring next year? _____

Will you be increasing Marketing/Adv. next year? _____

SPECIALTIES (CHOOSE ONE)

Choose **ONLY ONE** specialty as your primary specialty.
You will be able to add more later.

CONTRACTOR SPECIALTIES

- | | |
|--|---|
| <input type="checkbox"/> Addition | <input type="checkbox"/> Fire/Water Restoration |
| <input type="checkbox"/> Aging in Place/Universal Design | <input type="checkbox"/> Flooring/Carpet Installation |
| <input type="checkbox"/> Air Condition/Heating | <input type="checkbox"/> Framing |
| <input type="checkbox"/> Asphalt | <input type="checkbox"/> Green Building |
| <input type="checkbox"/> Basement | <input type="checkbox"/> Historical Renovation |
| <input type="checkbox"/> Bath | <input type="checkbox"/> Home Ent./Audio/Video |
| <input type="checkbox"/> Brick/Masonry/Stucco | <input type="checkbox"/> Home Security |
| <input type="checkbox"/> Carpenter | <input type="checkbox"/> Kitchen |
| <input type="checkbox"/> Closets | <input type="checkbox"/> Painting |
| <input type="checkbox"/> Concrete | <input type="checkbox"/> Plumbing |
| <input type="checkbox"/> Custom Home | <input type="checkbox"/> Pool/Spa |
| <input type="checkbox"/> Deck/Patio/Porch/Steps | <input type="checkbox"/> Roofing/Siding |
| <input type="checkbox"/> Design/Build | <input type="checkbox"/> Solar |
| <input type="checkbox"/> Drywall/Plaster | <input type="checkbox"/> Tile Installation |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Waterproofing |
| <input type="checkbox"/> Energy Mgt./Insulation | <input type="checkbox"/> Window Installation |
| <input type="checkbox"/> Excavation/Foundation | |

SUPPLIER/MANUFACTURER SPECIALTIES

- | | |
|--|---|
| <input type="checkbox"/> Appliances | <input type="checkbox"/> Insulation |
| <input type="checkbox"/> Building Supplies | <input type="checkbox"/> Kitchen/Bath Fixtures |
| <input type="checkbox"/> Built-in Furniture | <input type="checkbox"/> Lighting/Electrical |
| <input type="checkbox"/> Cabinets | <input type="checkbox"/> Lumber |
| <input type="checkbox"/> Ceramic Tile/Marble/Granite | <input type="checkbox"/> Molding/Millwork |
| <input type="checkbox"/> Countertops /Solid Surfaces | <input type="checkbox"/> Mobile Storage |
| <input type="checkbox"/> Doors | <input type="checkbox"/> Paint and Supplies |
| <input type="checkbox"/> Drywall | <input type="checkbox"/> Plumbing Supplies |
| <input type="checkbox"/> Elevators/Stairlifts | <input type="checkbox"/> Recycled Building Supplies |
| <input type="checkbox"/> Fireplaces | <input type="checkbox"/> Roofing/Siding Supplies |
| <input type="checkbox"/> Flooring/Carpet | <input type="checkbox"/> Staircases/Rails |
| <input type="checkbox"/> Garage Doors | <input type="checkbox"/> Stone/Hardscape |
| <input type="checkbox"/> Glass/Mirrors/Windows | <input type="checkbox"/> Window Coverings/Shutters |

PROFESSIONAL SERVICES SPECIALTIES

- | | |
|--|---|
| <input type="checkbox"/> Advertising/Marketing | <input type="checkbox"/> Inspection Services |
| <input type="checkbox"/> Arborist | <input type="checkbox"/> Insurance |
| <input type="checkbox"/> Architect | <input type="checkbox"/> Interior Design |
| <input type="checkbox"/> Coaching/Consulting | <input type="checkbox"/> Labor/Staffing |
| <input type="checkbox"/> Computer/Software | <input type="checkbox"/> Landscape architect |
| <input type="checkbox"/> Construction Management | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Design | <input type="checkbox"/> Lighting Consultant |
| <input type="checkbox"/> Draftsman | <input type="checkbox"/> Photography Services |
| <input type="checkbox"/> Engineering | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Financial Services | <input type="checkbox"/> Storage/Removal/Dumpster |
| <input type="checkbox"/> Handyman Services | <input type="checkbox"/> Surveyor |



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TRADE REFERENCES

Please provide two references that can speak to your company's professionalism, sound business practices, or ethical standards.

1) _____
Name

Company

Phone

Email

2) _____
Name

Email

DUES

NARI Mid-Maryland dues:

Remodeler Membership\$500

Associate Membership\$250

Non-refundable application fee.....\$ 75

Total Due..... \$ _____

I would like to join a Committee

Education Membership Marketing

You may assign an employee to be on a committee as well. Please provide employee name and email.

Employee Name

Employee Email

Return this application with all fees and dues to:

NARI Mid-Maryland
c/o Filomena Thompson
7210-B Corporate Court
Frederick, MD 21703
C 301-758-4617 / Fax 301-644-5561
Email: narimidmd@gmail.com
www.narimidmaryland.org

Payment will be made by

- American Express Mastercard Visa
 Check (Make check payable to NARI Mid-Maryland)

DO NOT SEND VIA EMAIL if you are paying with a credit card. FAX to 301-644-5561. Thank you.

Card #

Exp Date

Security Code

Signature

ACKNOWLEDGMENT

Please review this application to ensure that all information is complete and correct. Dues must accompany this application when returned to the NARI Chapter at the address below (Please retain a copy for your files). Application to the NARI Chapter grants the Chapter permission to conduct a credit check in compliance with the Fair Credit Reporting Act (www.ftc.gov/os/statutes/fcrajump.shtml) and relevant public laws. Chapter membership is provisional according to and subject to approval of the NARI Chapter Board of Directors.

NARI Mid-Maryland membership dues are \$500 per year payable at the time of application by check or credit card plus a one-time, non-refundable \$75 application processing fee (total \$575). \$180 of dues is paid to NARI National; the balance is retained by the Chapter. NARI National recognizes regional members—members who belong to more than one local chapter (but are not national members). National designates one chapter as “primary” and others as “secondary.” The company pays the national dues ONLY through the “primary” chapter. Metro DC and Mid-Maryland offer a \$50 discount (per chapter) to members who belong to both, a savings of \$100.

I have reviewed the information contained in this membership application and confirm that this information is correct to the best of my knowledge and attest that I am in compliance with the Code of Ethics printed on the back of this application, and agree to comply with the Bylaws and Code of Ethics of the Association in the future.

Note: Membership dues are deductible as an ordinary and necessary business expenses; however, pursuant to the Omnibus Reconciliation Act of 1993, NARI National estimates that \$20.00 of these dues is not deductible for federal income tax purposes. The dues amount also includes a \$15.00 subscription to “The Remodeler’s Journal” magazine which may not be deducted. The local chapter has also included membership dues in the National Association of the Remodeling Industry which they have agreed to forward to NARI headquarters. Finally, contributions to the National Remodeling Foundation (deductible as charitable contributions) may be included with your dues payment.

I hereby affirm that I/my company is in good standing with all State and Local licensing laws.

Signature