



Application for your 3 in 1 Membership

Home Builders Association of Northern Michigan (HBANM)

Home Builders Association of Michigan - National Association of Home Builders

(Serving the Building Industry in Charlevoix, Cheboygan, Emmet and Otsego Counties)

Applicant Name: _____ Title: _____

Company: _____

Business Phone: _____ FAX: _____ Cell: _____

Business Address: _____ City: _____ Zip _____

Name and Number for Billing: _____

Website: _____

E-Mail: _____

Designations (such as CGB, CGR) _____

Years in Business: _____ Years Licensed(if applicable) : _____ Type of License Held: _____

License Number: _____ License Expiration Date: _____

Membership Type:

_____ Builder Member (Any individual holding a current Builders License) \$550

_____ Associate Member (Any other individual involved with the building industry) \$550

_____ Affiliate Member (Any employee of a currently registered HBANM Member) \$100

Additional Opportunities:

_____ Remodelers Council- **Full Membership Required** \$60

(A council of HBA Builders serving as a dedicated resource for remodeling Members)

_____ High Performance Building Council- **Full Membership Required** \$35

(A council of HBA Builders serving as a dedicated resource for high performance building.)

_____ Professional Women in Building- **Any employee of a currently registered HBANM Member** \$80

(Connecting Women, Sharing Ideas, Strengthening our Industry)

Referred by or Sponsored by: *(Current HBANM Member)* _____

Sponsor Comments: _____

Sponsor Phone: _____

Business Reference: _____ **Date:** _____

Comments: _____

Reference Phone: _____

Annual Dues Payment Method:

Submit applications to:

Check one:

____ Check enclosed payable to HBANM

____ VISA, MasterCard, AmEx Payment in full
(Include a 3.5% credit card processing fee)

HBA Northern Michigan
455 Bay Street
Petoskey, MI 49770
Fax (231) 348-8155
Phone (231)348-9770
www.HBANM.com

Email your application to: info@HBANM.com

Credit Card Number

Exp. Date

Security Code (last 3 digits on signature line)

Signature

Total Amount Enclosed

Completed application, proof of Michigan Builders License or Maintenance and Alteration License (if applicable) and payment must be received in order for your application to be processed. Your application will be processed within 30 days of its remittance to our offices unless otherwise requested.

By signing this application I acknowledge my business has been conducted professionally, ethically and lawfully and I agree to abide by the Bylaws, Policies and Code of Ethics of the Home Builders of Northern Michigan (HBANM), Home Builders Association of Michigan (HBAM) and National Association of Home Builders (NAHB) to which I will be a member upon approval of this application.

I understand that dues payment to HBANM is NOT deductible as a charitable contribution for federal tax purposes. However, that portion of my dues NOT allocated for political lobbying may be deductible as a necessary business expense.

Applicant Signature: _____ Date: _____

Thank you for applying for membership in the Home Builders Association of Northern Michigan (HBANM). We're sure you'll find value in your investment and fulfillment in your time with the Association.

It is unlawful under Federal and State Law to discriminate on the basis of race, creed, color, national origins, ancestry, sex, sexual orientation, mental status, age, lawful source of income, mental retardation, mental or physical disability and familial status.

This area for HBANM Administrative use only

_____ Application Received Complete

_____ License Verified

_____ Code of Ethics Signed

_____ NAHB Membership Information Reporting Codes Recorded

_____ New Member Date

_____ Membership Committee Contact

_____ Ambassador Assigned Name _____

_____ HBAM & NAHB Registration Number _____

_____ Welcome Letter Sent

_____ New Member Visit with Executive Officer

Member



**National Association
of Home Builders**





The Home Builders Association of Northern Michigan (HBANM) is a local association of the Michigan Association of Home Builders (MAHB) and the National Association of Home Builders (NAHB), and abides by their bylaws.

Members of the HBANM are required to abide by the HBANM Code of Ethics.

The Code of Ethics for the HBANM is as follows:

1. Our paramount responsibility is to our customers, our community, and our country.
2. Honesty is our guiding business policy
3. High standards of health, safety, and sanitation shall be built into every home.
4. Members shall deal fairly with their respective employees, subcontractors, and suppliers.
5. As members of a progressive industry, we encourage research to develop new materials, new building techniques, new building equipment, and improved methods of home financing to the end that every home purchaser may receive the greatest value possible for every dollar spent.
6. All sound legislative proposals affecting our industry and the people we serve shall have our informed and vigorous support.
7. We hold inviolate, the free enterprise system and the American way of life.
8. We pledge our support to our associates, our local, state and national association, and all relate industries concerned with the preservation of legitimate rights and freedoms.
9. We assume these responsibilities freely and solemnly mindful that they are part of our obligation as members of the Home Builders Association of Northern Michigan, Inc.

Member Signature: _____ Date: _____

NAHB Membership Information Reporting Codes

Section 1: Circle the member's most important business activities from the list of codes offered (**enter up to 3 different codes**).

Note: For "other" associate (code Z), please fill in the blank for "Other (Specify)."

Section 2: Circle or fill in the most accurate demographic information in each category

SECTION 1 :

Builder Member Classification	Associate member Classification	Subcontractors and Specialty Trade contractors
A Single Family Spec/Tract Building	L Accounting	W1 Carpentry Work
B1 Single Family General Contracting	M1 Architecture	W2 Electrical Work
B2 Single Family Custom Building	M2 Engineering	W3 Masonry, Stone Work, Tile, Plaster
C Multifamily Building (Units)	M3 Planner or Designer	W4 Landscaping
D Multifamily Building Owner (Rental)	N Legal Services	W5 Plumbing, Heating and Airconditioning
E Multifamily General Contracting	O Computer Products and Services	W6 Roofing, Siding and Sheet Metal Work
F Remodeling- Residential	P1 Commercial Banking/Thrift Institution	W7 Painting and Paper Hanging
G Remodel-Commercial	P2 Mortgage Banking	W8 Floor Laying and Other Floor Work
H Commercial Building (Own Account)	Q Insurance or Title Company	W9 Concrete Work
I Commercial General contracting	R Marketing, Advertising or Public Rel.	WA Excavation Work
J Land Development	T Property Management	WC Land Surveyor
K Manufacturing of Modular/Panelized/Log Homes	U Real Estate	WD Security System
	Y Utilities	WE Insulation
	Z Other (Specify) _____	

Wholesale Dealers/Distributors

- X1 Appliances
- X2 Building material/Lumber
- X3 Floor coverings
- X4 Paint/Wall Coverings
- X5 Other Wholesale Dealership

Retail dealer/Distributors

- V1 Appliances
- V2 Building materials/Lumber
- V3 Floor Coverings
- V4 Paint/Wall Coverings
- V5 Other Retail Dealership

SECTION 2:

Annual Dollar Volume:

Enter the member's approximate annual volume of new residential construction/development, using the following codes:

- | | | |
|---------------------------|---------------------------------|--------------------------------|
| 1. Under \$500,000 | 3. \$1 Million to \$4.9 Million | 5. \$10 Million - \$15 Million |
| 2. \$500,000 to \$999,999 | 4. \$5 Million to \$9.9 Million | 7. No construction activity |
| | | 8. More than \$15 Million |

Annual Number of residential dwelling units built in the past 12 months:

Enter the member's approximate number of units built using the following codes:

- | | | |
|------------|--------------|---------------|
| 1. 0 units | 3. 11 to 25 | 5. 101 to 500 |
| 2. 1 to 10 | 4. 26 to 100 | 6. Over 500 |

Total Paid employees:

Enter the total number of employees in the space provided. Include the member in you total figure _____

Business Title:

Enter the code that best describes the member's business title, using the following codes:

- | | | |
|--------------------------------|--------------------------------|-----------------------------------|
| 1. President/CEO | 2. Owner, Principal or Partner | 3.VP/General Manager |
| 4. Construction Superintendent | 5. Sale and Marketing Manager | 6.Architect, Designer or Engineer |
| 7. Financial manager/Director | 9. Other (Specify) _____ | |

BUSINESS NAME _____

BUSINESS PHONE _____

BUSINESS E-Mail _____

CONTACT PERSON _____