

City: __

MEMBERSHIP APPLICATION

Completed application and payments can be sent: Via Mail: NARI – 700 Astor Lane, Wheeling, IL 60090

Via Fax: 847-298-9225

Via Email: membership@nari.org

Phone: 847-298-9200

For NARI office use only Date Rcvd NARI office _____ Approved Not Approved (check one) Date Posted NARI office ____ BBB report attached

| If you were referred by a NARI member please list them b | elow: | | | | | |
|--|--------------------|--|---------------------------|--------------------------|--|--|
| Referrer's Name: | | | I was not re | eferred by a NARI member | | |
| Referrer's Company: | | , was not it | sterred by a 10 at member | | | |
| ELIGIBILITY for NARI National membership requires that business in compliance with the NARI Code of Ethics. Com | | | | | | |
| Have you previously held a NARI membership? Yes | No | | | | | |
| Primary Representative: | Title: _ | | | | | |
| Cell Phone: | Email: | Email: | | | | |
| Company Name: | | | | | | |
| Company Address: | City: | | ST | Zip: | | |
| Telephone: | Fax: | | Website: | | | |
| List all representatives to receive NARI member benefits | (use separate sh | neet if necessary) | | | | |
| Representative Name: | Email Ac | Email Address: | | | | |
| Representative Name: | Email Ac | | | | | |
| Representative Name: | Email Ac | ddress: | | | | |
| Representative Name: | Email Ac | ddress: | | | | |
| Company Type: | Contract | tor/License # (if requi | red by jurisdiction) | | | |
| State or local business license/registration number: | | | State of incorpora | ition | | |
| Date company was established: | Liability | Liability insurance company and policy number: | | | | |
| | | | | | | |
| Please answer ALL of the following (for NARI use only): | | | | | | |
| 1. What is your industry involvement? | | | | | | |
| 2. Other trade association memberships: | | | | | | |
| 3. Customer References (job completion must be within the | he last 18 months, |) | | | | |
| Name: | | | Project Completion | n Date: | | |
| City: | | Zip: | | | | |
| • | | | | | | |
| Name: | | | Project Completion | n Date: | | |
| City: | | Zip: | | | | |
| | | | | | | |
| Name: | | | Project Completion | n Date: | | |

Zip: ____

_ Phone: _

_____ ST:

MEMBERSHIP APPLICATION

(Continued)

4. Supplier/Credit References

Application for membership authorizes NARI to conduct a credit and reference check subject to the Fair Credit Reporting Act and relevant public law. Applicant also understands that membership is subject to acceptable Better Business Bureau report, or other reporting agencies and that information may be collected from them.

| Name: | | | | |
|---|---------------------------|--------------------------------|------------------|--|
| Address: | City: | ST: | Zip: | |
| Phone: | Fax: | | | |
| • | | | | |
| Name: | | | | |
| Address: | | | | |
| Phone: | | | | |
| Thore. | | | | |
| Name: | | | | |
| Address: | City: | ST: | Zip: | |
| Phone: | Fax: | | | |
| • | | | | |
| | | | | |
| 5. Has/does the applicant or any company owned by applicant's o | wner(s), or any of applic | cant's owner(s), directors, of | ficers, managing | |
| employees or qualifying person: | | | | |
| a. Ever been convicted of a crime or been involved in any | incident where | | | |
| physical harm or threats toward another person or sexu | | Yes | No | |

If you answered "Yes" to any of the questions listed above, please provide a detailed written explanation, including but not limited to the identity of the person or company involved, and how the matter was resolved or will be resolved if pending.

b. Have any mechanics liens or lien foreclosures (excluding pre-lien notices) filed

c. Ever been a principal or officer of a building or remodeling business whose

e. Filed for bankruptcy or protection from creditors within the last 5 years?

f. Had any formal administrative action taken by any local, state, or federal authority against your business and/or your state contractor license?

contractor's license has been revoked, suspended or denied?

g. Have any unresolved issues with the Better Business Bureau?

d. Have any unsatisfied judgments?

against any of your projects that have remained unresolved for longer than one year?

Yes

Yes

Yes

Yes

Yes

Yes

No

No

No

No

No

No

MEMBERSHIP APPLICATION

(Continued)

Disaster Recovery Services

Please choose UP TO 10 specialties for your company.

These keywords will help consumers find you when searching the NARI Directory at remodelingdoneright.com.

NOTE: IF YOU SELECT MORE THAN 10, only the first ten terms alphabetically will be displayed online.

Accessible Products/Services Green Remodeler Realtors Additions Green Remodeling Consultant Recycling

Air Duct Cleaning Gutters Remodeling Contractor

Renovation **Appliance Services** Handyman Services **Appliances** Hazardous Materials Removal Rentals

Architectural Design Heating Air Conditioning Contractor Residential & Commercial Remodel

Asbestos Removal Residential Remodeling Home Décor

Audio Visual Home Performance Diagnostics Restoration Awnings/Canopies Home Technology Budgeting Roofing

Bank Home Technology Directory Roofing Contractor Basement Remodeling Home Technology Products & Services Room Additions

Baths Home Theater Safety Brick/Stone Inspector School Brick/Stone/Marble/Granite Insulation Security **Building Materials/Supplies** Insulation Contractor Sheds **Business Services/Consulting** Insurance Sidina

Cabinet Installer Interior Design Siding Contractor

Cabinets Interior Design Showroom Skylight Software Cabinets - Refacing Kitchens

Kitchens/Baths Caulks/Sealants Solar

Chimneys Landscapers Specialty Contractor Closet Design & Install Lead Check Kits Stains

Commercial Remodeling **Legal Services** Stair Systems

Concrete Services Stairs/Newels/Balusters **Lighting Contractor**

Countertops Lighting/Lighting Controls Storage Decks & Patios Manufacturer Stucco **Delivery Service** Marble & Stone Sunrooms Television Demolition/Deconstruction Marketing Services

Design Firm Masonry Contractor Tile

Media Tile Contractor Design/Build Metal Fabrication

Training Institution Doors Millwork Drvwall Mold Tree Service

Earthquake Protection Mortgage Universal Design Remodeler

Tools

Page 3 of 4

Education Moulding Vacuum Systems

Electrical Services Mudjacking Vehicles/Truck/Car/Dealership

Elevators Ventilation Non-Profit Home Building

Engineer Video Productions

Environmental Hazards Training Provider Outdoor Living/Kitchens Waste Disposal Paint & Finishes **Excavation Services** Water Damage

Fasteners Painting Water Purification Fence **Patios** Waterproofing Financial Services Wholesaler Paving

Fireplaces Pest Control Wholesaler-Marble & Granite

Flooring Photography Window Coverings Foundations Plumbing Window Manufacturer Franchisor **Plumbing Contractor** Window Treatments

Furniture Windows Pools Garage Doors Porches Windows/Doors Professional Services Wine Cellars Glass

Graphic Design & Printing Publisher Wood Green Designer/Consultant Radio Station

Green Products Railings

MEMBERSHIP APPLICATION

(Continued)

Please review this application to ensure that all information is complete and correct. Credit card information must accompany this application.

Application to NARI grants NARI permission to conduct a credit check in compliance with the Fair Credit Reporting Act (www.ftc.gov/os/statuses/fcrajump.shtm) and relevant public laws. Membership is provisional and is subject to approval.

NARI Code of Ethics

Each member of the National Association of the Remodeling Industry agrees to comply with the NARI bylaws and is pledged to observe high standards of honesty, integrity and responsibility in the conduct of business:

- By promoting in good faith only those products and services which are known to be functionally and economically sound, and which are known to be consistent with objective standards of health and safety
- By making all advertising and sales promotion factually accurate, avoiding those practices which tend to mislead or deceive the customer
- · By writing all contracts and warranties such that they comply with federal, state, and local laws
- · By promptly acknowledging and taking appropriate action on all customer complaints
- By refraining from any act intended to restrain trade or suppress competition
- · By attaining and retaining insurance as required by federal, state, and local authorities
- · By attaining and retaining licensing and/or registration as required by federal, state, and local authorities
- · By taking appropriate action to preserve the health and safety of employees, trade contractors, clients and the public

ACKNOWLEDGMENT

NOTE: This application is used internally, and we do not sell or share your information with anyone. The information contained on this membership application is correct to the best of my knowledge and I authorize NARI to verify all information. Any incorrect or willfully misleading information supplied on this membership application will be grounds for denial or revocation of membership. As an applicant, we shall not indicate through any form of advertising or publicity that we are members of NARI until notification that our application is approved. Applicants are not charged until approved. All approved NARI membership fees are non-refundable. Upon approval for membership, we agree to abide by the rules and regulations of NARI, by its Code of Ethics, bylaws and other regulations enacted by the Board of Directors and/or as defined in the bylaws. I also understand that work on any residential structure built prior to 1978 requires lead paint certification, and that I am in compliance with the EPA if taking on this type of work.

| Signature | Date | | | | | |
|--|-------------------------------------|--|----------------------------|--|--|--|
| NOTE: NARI National membership dues are not deductible a | s a charitable contribution but may | be deductible as an | ordinary business expense. | | | |
| NARI National Membership Dues: \$500.0 | Credit Card (Plea | Credit Card (Please complete form below) Check # | | | | |
| Ple | ease Complete For Cred | it Card Payme | ents | | | |
| Visa MasterCard Americ | can Express | | | | | |
| Card Number: | Exp: | CVV: | Amount Authorized: | | | |
| Name on Card: | | | | | | |
| Billing Address: | | | | | | |
| City: | State: | Zip: | | | | |
| Signature: | | | | | | |
| | | | | | | |

COMPLETED APPLICATION & PAYMENTS CAN BE SENT:

Via Mail: NARI, 700 Astor Lane, Wheeling, IL 60090

Via Fax: 847-298-9225

Via Email: membership@nari.org

Phone: 847-298-9200