

New Member Enrollment Form



Applicant: _____ Title: _____
 Company: _____
 Phone: _____ Cell: _____ E-mail: _____
 Business Fax: _____ Personal Fax: _____
 Business Address: _____
 City: _____ State: _____ Zip: _____
 Website: _____ Builders License # _____ Exp _____

Membership Classification: (Refer to codes on reverse side)

Please check one

- Builder
- Associate
- Affiliate

If Affiliate, Employer's PIN Required Below

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Sponsor PIN for Spike Credit

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Sponsor's Name: _____

Business Activities for Builder and Associate Members Only.

Primary*	Secondary*	Tertiary*	\$Vol	Units	# of Employees	Title*

* For Associate Members, if Code Z is used for business activity, please explain:

* If Code 9 is used, please specify title: _____

IMPORTANT NOTICES

Annual membership dues for builder and architect members also include \$15.00 for a one-year subscription to *BUILDER* Magazine. Members may not deduct subscription prices from total dues.

Consent:

I agree to abide by the constitution and bylaws of the Local Association to which this membership application is being directed, of the National Association of Home Builders of the United States with which it is affiliated, and of the State Association if such affiliation exists. A remittance of \$ 550.00 representing my annual membership dues accompanies this application.

I understand that dues payments are not deductible as charitable contributions for federal income tax purposes. However, dues payments may be deductible as an ordinary business expense, subject to an exclusion for lobby activity. Because a portion of your dues is used for lobbying by NAHB, and affiliated state (if applicable) and local association, 17 % of the total dues, or \$ 47.00, is not deductible for income tax purposes.

I understand that by providing the fax number(s) above and signing this form, on behalf of my company/organization specified above, I consent to receive faxes sent by or on behalf of the National Association of Home Builders, and the affiliated state and local HBAs of which I am also a member. I further represent that I am authorized to give this consent on behalf of my company/organization.

Please indicate state (if applicable) and local association names: Clarksville Montgomery Co. Home Builders Association

P.O. Box 1167 Clarksville TN 37041-1167

Signature of Applicant: _____ Date: _____

Return this enrollment form to the Local/State (if applicable) HBA to which you are applying.

NAHB Membership Codes

PIN: Member's Personal Identification Number (PIN) can be found on Monthly Membership Roster Report

Sponsor ID: PIN of the member to receive Spike credit can be found on the Monthly Spike Club Roster.

Business Activity Codes: Enter the member's primary, secondary, and tertiary business activities in the 3 sets of boxes provided. If code Z is used for Associate members, please specify activity on the front.

Builder Member Activity Codes	Associate Member Activity Codes	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 Setting, Plastering
C Multifamily Building (Condo/Coop Units)	M3 Planner or Designer	W4 Landscaping
D Multifamily Building/Ownership (Rental Units)	N Legal Services	W5 Plumbing, Heating and Air Conditioning
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 Remodeling – 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 Relations	WA Excavation Work
J Land Development	S Building Material Manufacturing	WC Land Surveyor
K Manufacturing of Modular/Panelized/Log Homes	T Property Management	WD Security Systems
	U Real Estate	
	Y Utilities	
	Z Other (Specify)	

Wholesale Dealers/Distributors

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

Retail Dealers/Distributors

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

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 \$499,999 | 5. \$10 million or over |
| 2. \$500,000 to \$999,999 | 4. \$5 million to \$9,999,999 | 6. No construction activity |

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 applying member in your total figure.

Business Title:

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

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

