



NATIONAL ASSOCIATION OF
THE REMODELING INDUSTRY
Remodeling Done Right.™

GREATER CHICAGOLAND

**LOCAL CHAPTER
MEMBERSHIP
APPLICATION**

780 LEE STREET, SUITE 108
DES PLAINES, ILLINOIS 60016
TEL. 847-298-6212
SECURE FAX 847-388-4800
EMAIL. INFO@NARICHICAGO.ORG
WEBSITE: WWW.NARICHICAGO.ORG

Please return this form and any applicable dues and certificates to Mimi Altman, Executive Director, at the address, email or fax above.

**NATIONAL ASSOCIATION OF THE
REMODELING INDUSTRY CHICAGOLAND
CHAPTER MEMBERSHIP APPLICATION**

Please Print—All information must be completed.

Eligibility for NARI membership requires that applicant 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 NARIGC Code of Ethics. Applicants agree to comply with the NARI Bylaws.

Company Name _____

Contact Person(s) _____

Social Security # _____ FEIN _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Fax _____

Email Address _____

Website Address _____ Sponsor (if any) _____

Applicant Profile (for NARI use only; to be held in strict confidence). ALL INFORMATION MUST BE COMPLETED:

1. What is your industry involvement?
 Contractor Wholesale/Supplier
 SubContractor Manufacturer
 Lender Designer/Architect
 Utility Other
(explain) _____
2. Please indicate your approximate percentage of dollar volume in each of the following areas:
 Residential Repair/Remodeling
 Commercial/Industrial Remodeling
 New Construction
 Other _____
3. Area of specialization (total should equal 100%)
 % Roofing % Replacement Windows
 % Insulation % General Remodeling
 % Kitchen/Bath % Electrical
 % Siding % Heating/AC
 % Other (explain) _____
4. Have you previously held NARI Membership?
 No Yes
If Yes, When? _____
5. Date company was established: _____
6. Number of full-time employees: _____
6. Company type:
 Sole Proprietorship Partnership
 Closely-held Corporation LLC
 Public Corporation
8. Please list other trade associations in which you hold memberships: _____

ALL INFORMATION MUST BE COMPLETED

9. Please indicate your state or local business license number: _____
10. Liability Insurance Company (mandatory): _____ Policy #: _____
11. Workers' Comp. Company if applicable: _____ Policy #: _____

*In Illinois remodeling contractors are required by law (815 ILCS 513/1 et. Seq.) to carry both public liability insurance and, in most cases, insurance of \$10,000 per occurrence covering work contrary to code. **Please provide insurance certificates indicating you carry this insurance or proof you are exempt from its requirements, and supply the insurance company name and policy number.***

12. The Principal owners or stockholders and officers of Applicant are: (List all Officers, Directors, any Shareholder owning 5% or more of the stock of Applicant, all general partners, all members or managers of any Limited Liability Company, and the owner of any Sole Proprietorship.)

Name	Home Address	Home Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

For all these Officers, Directors, Shareholders, Partners or Member or Managers please also list (on a separate page) any businesses they have been an officer, director, shareholder, general partner, member or manager or sole proprietorship in during the last 5 years.

It is understood that any incorrect information could disqualify an applicant from membership. Applicant agrees to conform to the National Association of the Remodeling Industry (NARI) Code of Ethics and Association bylaws.

Signed: _____ Title: _____

Permission is granted for a credit check in compliance with the Fair Credit Reporting Act and Public law 91-508 for information regarding the applicant's character, general reputation, and personal characteristics.

Signed: _____ Title: _____

Please Print Name and Title _____

YOUR MEMBERSHIP IS NOT OFFICIAL UNTIL YOU HAVE BEEN ACCEPTED BY THE NARIGC BOARD OF DIRECTORS. PLEASE DO NOT REFER TO YOUR COMPANY AS A MEMBER OF NARIGC UNTIL AFTER ACCEPTANCE.

PAYMENT: FULL DUES OR INSTALLMENT PLAN	National Remodeling Foundation Donation (optional): \$ _____
AUTHORIZATION MUST ACCOMPANY APPLICATION	_____ Check (Enclosed) _____ VISA _____ MC _____ AmEx
Local Chapter Dues	_____ Pay in FULL _____ Installment Plan (credit cards only)*
National Dues	For payments in FULL only:
(waived ONLY if a National Member or a primary member in the	Card # _____
Milwaukee, Madison, Minnesota, Kansas City, St. Louis, Omaha or	Name on Card: _____
Fox Valley (WI) NARI chapters.)	Expiration Date: _____ Total Enclosed: \$ _____
Filing Fee (for new or lapsed members)	* Please complete installment plan authorization and include with application.
TOTAL	_____

Note: Membership and dues are deductible as ordinary and necessary business expenses; however, pursuant to the Omnibus Reconciliation Act of 1993, NARI National estimates that \$20.00 of dues is not deductible for federal income tax purposes due to lobbying efforts. (Consult your local chapter concerning amounts that may not be deductible due to the chapter's lobbying efforts.). Contribution to the National Remodeling Foundation are deductible as charitable contributions.

**NARI OF GREATER CHICAGOLAND
INSTALLATION PLAN AUTHORIZATION/CREDIT CARD PAYMENT AGREEMENT**

- Pay entire amount of invoice/statement (all invoices) \$ _____
- Pay partial invoice/statement (dues payments ONLY- minimum \$200) \$ _____
- Subscribe to Dues Installation Plan as described below (dues payments ONLY)

Member Information:

Company: _____

CC Billing Address, City, Zip: _____

Telephone #: _____ E-Mail: _____

Contact Person/Authorized Signer on Credit Card: _____

Name on Credit Card: _____

Type of Card: Visa: _____ Master Card: _____ Am Ex: _____

CC#: _____ Exp. _____

Annual Dues for Membership in NARI of Greater Chicagoland are currently \$550.00 with an additional one time processing fee of \$25.00 for an initial application, or any renewal application if your membership ever expires and you again apply for membership. By signing below you agree to pay these annual dues and any processing fee(s) in installments and authorize NARI of Greater Chicagoland to automatically bill those charges to the above credit card as and when provided in this Agreement. There is an additional charge for each installment payment if you select this automatic billing feature. Membership in NARI of Greater Chicagoland are offered on a yearly basis only, therefore you remain liable for a full year's dues even if you resign or if your membership is terminated involuntarily by NARI of Greater Chicagoland for any reason. You agree that NARI of Greater Chicagoland may automatically charge the above credit card for your annual membership dues of \$550.00 and any applicable application processing fee of \$25.00 together with the installment fee as follows. The due date of each installment payment is referred to as a Transfer Date.

Payment Schedule for initial membership applications/lapsed memberships (does not apply to National or Secondary Regional Members*):

- 1. First Payment is due upon acceptance of your application for membership by NARI of Greater Chicagoland: \$200.00
- 2. Eleven subsequent payments due on the first business day of each month: \$37.18.

Total: \$608.98

Payment Schedule for renewal memberships timely submitted (does not apply to National or Secondary Regional Members*):

- 1. First Payment is due on the first business day of the anniversary month of your acceptance for membership by NARI of Greater Chicagoland: \$200.00
- 2. Eleven subsequent payments due on the first business day of each month: \$34.32

Total: \$577.52

** Secondary Regional Members are those who hold primary membership in the Milwaukee, Madison, Minnesota, Kansas City, St. Louis, Omaha and/or Fox Valley (WI) NARI Chapters. In the case of these or National members, dues must be paid in full.*

AUTHORIZATION: By signing this Agreement, you, an authorized signer on the above credit card, authorize NARI of Greater Chicagoland to charge the above credit card (or from a substitute credit card provided by you to NARI of Greater Chicagoland at any time) all amounts due to NARI of Greater Chicagoland in accordance with this Automatic Dues Installment Payment Agreement. The amount due may include the payment amount specified above, any delinquent payments, and/or any other unpaid fees or charges due NARI of Greater Chicagoland. NARI of Greater Chicagoland may make these charges or debits on or within three (3) business days before or after each Transfer Date and charges or debits may continue until this Automatic Dues Installment Payment Agreement is terminated or cancelled. Payments due on a Transfer date may vary from the above schedule because of past unpaid fees or other fees or charges due to changes in NARI of Greater Chicagoland's dues structures. All fees, including any prepaid and recurring fees, are non-refundable. You must pay your dues whether or not you use NARI of Greater Chicagoland services. You also agree to pay NARI of Greater Chicagoland an administrative fee for any declined debit or charge or NSF check. The current fee is \$25.00, subject to applicable state law. You must notify NARI of Greater Chicagoland of any changes in your account in a timely manner. You must notify NARI of Greater Chicagoland within sixty (60) days of a claimed error on your bank or credit card statement. You are also responsible for notifying your bank or credit card company of any error that appears on your bank or credit card statement in accordance with your agreement with them. You must have written proof if you claim your automatic charge to your credit card was not stopped within ninety (90) days after you make written notification to NARI of Greater Chicagoland to do so or NARI of Greater Chicagoland will not be obligated to reimburse you for charges to your credit card you claim should not have been made. NARI of Greater Chicagoland may, upon ten (10) days notice to you change the scheduled Transfer date for Payments due under this Agreement. Your failure to abide by the terms of this Agreement are grounds for termination of this Agreement and termination of your membership in NARI of Greater Chicagoland.

This authorization will remain in effect until you notify NARI of Greater Chicagoland in writing of your election to terminate it. NARI of Greater Chicagoland will stop making charges to your credit card within thirty (30) days of receipt of your notice to terminate. Upon such termination you will remain liable for paying dues to NARI of Greater Chicagoland directly.

Signature of Contact Person/Authorized Signer on Credit Card

Date