



MEMBERSHIP APPLICATION

- CONTRACTOR
- ASSOCIATE

3500 Lorain Ave., Suite 200 ♦ Cleveland, OH 44113
 Phone: 1-888-961-NARI (6274) ♦ Fax: 216/961-6974
 Website: NARICle.org ♦ E-Mail: info@PROohio.org

COMPANY NAME: _____ DATE: ___/___/___

CONTACT/REPRESENTATIVE: _____ TITLE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ - _____

PHONE: (____) ____ - _____ FAX: (____) ____ - _____ CELL: (____) ____ - _____

E-MAIL: _____ WEBSITE: _____

HOW DID YOU LEARN ABOUT NARI: _____

**** PROFILE INFORMATION IS FOR NARI GREATER CLEVELAND USE ONLY AND IS STRICTLY CONFIDENTIAL ****

Type of business: Sole Proprietor Partnership Corporation, Inc. date: ___/___/___ **Are you a franchise?** YES NO

What is your industry? Distributor, Supplier & Manufacturer Financing Utility
 General Contractor Publication Related Service
 Subcontractor Other _____

Please indicate your approximate percentage dollar volume in each of the following areas, if applicable: TOTAL SHOULD EQUAL 100%

____% Residential Repair/Remodeling ____% New Construction
 ____% Commercial/Industrial Remodeling ____% Other (Explain) _____

Area of Specialization: TOTAL SHOULD EQUAL 100%

____% General Remodeling ____% Insulation ____% Replacement Windows
 ____% Kitchen/Bath ____% Siding ____% Electrical
 ____% Roofing ____% Heating/AC ____% Other (Explain) _____

Annual Sales Volume: (CHECK ONE) Up to \$500,000 \$500,000 - \$1 M \$1M - \$2.5M \$2.5M - \$5M
 \$5M - \$7.5M \$7.5M - \$10M Over \$10M

of Years in Business*: _____ If less than 5 yrs., please detail previous employment: _____

of Full-Time Employees: _____

Have you previously held a PRO (or NARI) membership? YES NO If yes, when? _____ | **Are you a member of the Better Business Bureau?** YES NO If yes, what chapter? _____

Under what name (if different from current)? _____

(CONTRACTOR APPLICANTS ONLY) Please provide the name(s) and location(s) of vendors/suppliers you currently use:

____ City: _____
 ____ City: _____
 ____ City: _____

APPLICANT PROFILE

Names and/or principles of your company:

- 1.) _____
- 2.) _____
- 3.) _____

Title: _____
 Title: _____
 Title: _____

REFERENCES: Application for membership authorizes NARI to conduct a credit and reference check subject to the FAIR Credit Reporting Act and relevant public law. FEDERAL TAX ID # _____ - _____

Bank: _____
 Customer: _____
 Trade: _____

Phone: _____
 Phone: _____
 Phone: _____

*ELIGIBILITY FOR NARI MEMBERSHIP requires that applicants be actively engaged in the remodeling industry for at least one full year. Applicants must conduct their business in compliance with the NARI Code of Ethics; and applicants must agree to comply with the NARI Greater Cleveland Bylaws.

In order to process your application the following documents are required: *Questions? Call (216) 631-7764*

- A completed copy of your **MEMBERSHIP APPLICATION**
- A copy of your current **COMPANY CONTRACT w/Buyer's Right to Cancel.**
- A copy of your current **WORKER'S COMPENSATION CERTIFICATE.**
- A copy of your **LIABILITY INSURANCE.**
- A copy of your **REGISTRATION in at least one city in Ohio.**
- A copy of a signed **NARI CODE OF ETHICS - attached**
- Referrals from three Contractors – **REQUIRED ONLY FOR SUBCONTRACTORS**

Payment for **MEMBERSHIP DUES and \$25 Application Fee** via check, M/C or VISA must accompany application. **COST: \$520 Contractors; \$600 Associate Members.**
COST INCLUDES \$25 APPLICATION FEE. Dues are fully refunded if not accepted for membership.

NOTE: Contributions or gifts to NARI are not deductible as a charitable contribution for federal income tax purposes. However, dues are deductible by members as an ordinary business expense. Acceptance is subject to approval by NARI Greater Cleveland's Board of Directors.

I have reviewed the information in this Membership Application and confirm it to be correct to the best of my knowledge. By applying for a NARI Greater Cleveland membership, I agree to comply with the Bylaws and Code of Ethics of the Association. By signing this, I also agree to receive faxes from NARI unless the following box is checked. **DO NOT FAX**

SIGNATURE OF APPLICANT DATE: ____/____/____

P A Y M E N T	TOTAL \$ _____	CHECK # _____	<input type="checkbox"/> VISA	<input type="checkbox"/> MasterCard
	Credit Card # _____ -- _____ -- _____	Exp: ____/____	SEC _____	
	Name on credit card <i>(please print)</i> : _____			
	Signature of Cardholder: _____			

FOR NARI USE ONLY: RECEIVED ____/____/____ APPROVED DENIED ____/____/____



NARI Greater Cleveland

CODE OF ETHICS

Members shall subscribe to the following Code of Ethics, which is adopted by all members of NARI Greater Cleveland. Members of NARI are pledged to observe the highest standards of honesty, integrity and responsibility in the conducting of business.

- By promoting only those products and services, which are functionally and economically sound, and which are consistent with standards of health and safety.
- By making all advertising and sales promotions factually accurate with respect to product description, performance specifications and cost analysis, and by avoiding those practices which tend to mislead or deceive the consumer with respect to competitive pricing, savings claims or the nature and significance of contracts, warranties, finance agreements, completion certificates, lien waivers, or liability and worker's compensation insurance.
- By writing all contracts and warranties such that they are fair and mutually beneficial to all parties concerned, such that they are free of ambiguities of omissions which tend to obscure contractual obligations, and such that warranty terms and provisions are free of the capacity to mislead or deceive the customer as to the quality or longevity of the product or service.
- By honoring all contractual obligations in a reasonably prompt manner that is fair to all parties concerned.
- By promptly acknowledging and acting on all customer complaints and in situations where complaints appear unreasonable and persistent, by encouraging the customer to initiate an approved third party dispute settlement mechanism.
- By refraining from an act intended to restrain trade or suppress competition and to thereby promote the private enterprise system and its guarantee of equal rights for all.

I agree to comply with the NARI Code of Ethics:

Company Name: _____

Name of Company Representative: _____

Signature: _____ Date: __/__/__