

**For NARI Office Use Only**

Date Received at chapter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Determination date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞏 Approved 🞏 Not Approved

Date received at National office: \_\_\_\_\_\_\_\_\_\_\_\_

Date posted at National office: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞏 BBB report attached

🞏 Credit Report attached

**NARI North East WI Chapter**

**100 S. Birch St., Suite J**

**Kimberly, WI 54136**

**920-832-9003**

**NARIFoxValleyChapter@gmail.com**

**RemodelingDoneRight.com**

**Member Application (01/22)**

**Eligibility** for NARI membership requires that applicants be actively engaged in the remodeling industry for at least one year prior to application. Applicants must conduct their business in compliance with the NARI Code of Ethics. Applicants agree to comply with NARI National and Chapter Bylaws.

Company Name:

Owner/Executive/Sales Dir : \_\_\_\_Office Phone: \_\_\_\_\_\_\_\_\_\_\_\_

E-Mail: Cell Phone:

List other company employees who need to receive communication regarding news, activities, continuing education and trends from NARI (attach separate sheet if necessary):

Employee Representative (if other than Owner/Executive above): \_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee: Email:

Employee: Email:

Employee: Email:

Employee: Email:

Employee: Email:

Employee: Email:

Employee: Email:

Employee: Email:

Employee: Email:

Employee: Email:

Employee: Email:

Company Address:

City: State: Zip:

Telephone: Fax: Website:

Sponsor or Member Referral:

Applicant Facts (for NARI use only; used in strict confidence):

1. What is your industry involvement? ❑ Contractor ❑ Wholesaler / Supplier ❑ Manufacturer ❑ Subcontractor

❑ Utility ❑ Designer / Architect ❑ Lender ❑ Other

2. Date company was established: 3. State or local business license / registration number:

4. Liability Insurance Company: Policy Number:

5. Worker’s Compensation Carrier: Policy Number:

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6. Was the company name ever changed? ❑ Yes ❑ No If yes, please provide in an attachment all previous names, dates

when name was changed and reason for change.

7. Do you own any other business? ❑ Yes ❑ No If yes, please provide an attachment with the name(s) of any other

company(s) owned.

8. Has/does the applicant or any company owned by applicant’s owner(s), or any of applicant’s owner(s), directors, officers,

managing employees or qualifying person:

* 1. Previously held a NARI membership? ❑ Yes   ❑ No If yes when?
  2. Ever been convicted of a crime or been involved in any incident where physical harm or threats toward another person or sexual assault occurred?   ❑ Yes   ❑ No
  3. Have any mechanics liens or lien foreclosures (excluding pre-lien notices) filed against any of your projects that have remained unresolved for longer than one year?   ❑ Yes   ❑ No
  4. Ever been a principal or officer of a building or remodeling business whose contractor’s license has been revoked, suspended or denied?   ❑ Yes   ❑ No
  5. Have any unsatisfied judgments?   ❑ Yes   ❑ No
  6. Filed for bankruptcy or protection from creditors within the last 5 years?   ❑ Yes   ❑ No
  7. Had any formal administrative action taken by any local, state, or federal authority against your business and/or your state contractor license?   ❑ Yes   ❑ No
  8. Have any unresolved issues with the Better Business Bureau?   ❑ Yes   ❑ No

If you answered “Yes” to any of the questions listed above, please attach 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.

9. Please list 3 References (preferably a supplier, a sub-contractor and a client) we can contact who have done business with your firm in the last 3 years:

Name of Firm/Customer Contact Name Phone Number Email Address

1.

2.

3.

**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
* Making all advertising and sales promotion factually accurate, avoiding those practices which tend to mislead or deceive the customer
* Writing all contracts and warranties such that they comply with federal, state, and local laws
* Promptly acknowledging and taking appropriate action on all customer complaints
* Refraining from any act intended to restrain trade or suppress competition
* Attaining and retaining insurance as required by federal, state, and local authorities
* Attaining and retaining licensing and/or registration as required by federal, state, and local authorities

Please review this application to ensure that all information is complete and correct.

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**NARI North East Wisconsin Member Application (01/22)**

Dues and a Certificate of Insurance must accompany this application when returned to NARI North East Wisconsin Chapter. Application, any additional attachments, dues and Certificate of Insurance can be sent to the address above. Dues can be paid via credit card by calling the office at 920.832.9003 or online at RemodelingDoneRight.com. Please have your insurance company send the Certificate of Insurance annually to NARI North East Wisconsin Chapter at 100 S. Birch St., Suite J, Kimberly, WI 54136. Please retain a copy of this application and all additional attachments for your files.

Application to NARI grants NARI permission to conduct a credit check in compliance with the Fair Credit Reporting Act (www.ftc.gov/os/statutes/fcrajump.shtm) and relevant public laws.  Membership is provisional and is subject to the approval of the NARI North East Wisconsin Board of Directors. As a 501(c)(6) organization (Fed. Tax ID #132506648).

**NARI North East Wisconsin membership dues are not deductible as a charitable contribution but may be deductible as an ordinary business expense. To the extent that NARI engages in lobbying,**$**13 of dues are not deductible as an ordinary and necessary business expense. As a member of NARI North East Wisconsin, your organization is automatically also a member of NARI in the Neighborhood, a charitable 501(C)(3) organization devoted to community service in North East Wisconsin.**

**ACKNOWLEDGEMENT**

🞏 I have reviewed the information contained in this membership application and confirm that it is correct to the best of my knowledge and attest that I am in compliance with the Code of Ethics printed herein, and agree to comply with the Bylaws and Code of Ethics of the Association in the future. Any incorrect or willfully misleading information supplied on the membership application will be grounds for denial of membership or revocation of membership. Membership shall commence on the first day of the month that the Application is approved by the Board of Directors. Applicants shall not indicate through any form of advertising or publicity that they are members of this Chapter until their application is approved. Applicants not approved will have their money refunded.

Signature Title Date

Dues need to be paid by accompanying check made out to National Association of the Remodeling Industry or NARI

🞏 Check enclosed as follows

🞏 $555 Regular member paying chapter and national dues until 6/30/23

🞏 $575 Regular member paying chapter and national dues postmarked after 6/30/23

🞏 $325 Honorary member (nonprofit or government agency) paying chapter dues only

🞏 $325 Regional member (having already paid national dues through another chapter)

🞏 $ 35 Student member (must be enrolled in a home remodeling related program at FVTC or NWTC).