



**HOME BUILDERS & REMODELERS ASSOCIATION
of WESTERN MASSACHUSETTS**

MEMBERSHIP APPLICATION

Membership Annual Dues

- Builder \$385
- Associate \$385
- Affiliate \$100

Cash/Check or Credit Card accepted
(PAYABLE TO THE HBRAWM)

Applicant: _____

Company Name: _____

Title: _____

Address: _____

City/State/Zip: _____ Email: _____

Bus. Phone: _____ Fax: _____ Cell #: _____ Website: _____

Sponsored By: _____
(The first and last name of a current member of the HBRA -WM)

MA Contractors License No: _____ Expires _____ HIC #: _____ Expires _____

Primary Business Activity _____

Date Company Established: _____

ATTACH 3 LETTERS OF REFERENCE FROM COMPANIES YOU DO BUSINESS WITH; OR PROVIDE THE CONTACT INFORMATION BELOW. (ONE must be from a Bank or Supplier; ONE from a tradesperson (Builder, Remodeler, Subcontractor, etc.) and ONE Customer.

| | <u>Trades Person</u> | <u>Supplier/Bank</u> | <u>Customer</u> |
|--------------|----------------------|----------------------|-----------------|
| Name: | _____ | _____ | _____ |
| Address: | _____ | _____ | _____ |
| City/St/Zip: | _____ | _____ | _____ |
| Phone: | _____ | _____ | _____ |

I understand that my membership is contingent upon review and approval by the Home Builders Association of Western Massachusetts Board of Directors. I attest that I am of good character and reputation in the community and that all the information provided here is accurate to the best of my knowledge and belief. I agree to abide by the By-Laws and Code of Ethics of the Home Builders & Remodelers Association of Western Massachusetts.

Signature: _____ Date: _____