



National Association of Residential Property Managers

TRANSFERS / DELETIONS to EXISTING COMPANY MEMBERSHIP (Page 1)

Email both pages to info@narpm.org

Responsible Member: _____

Company Name: _____

Mailing Address: _____

City/ST/Zip: _____ Country: _____

Company Phone: _____ ext: _____ Contact #: _____

Local Chapter: _____ State Chapter: _____

Please check to transfer existing Company Members: There is no fee to transfer memberships within the company. *You must provide proof of termination or Real Estate Commission evidence that the member has left the firm.

From current Company Member: _____

To new Company Member: _____ Member Type: _____

Chapter: _____

Email: _____

Address (If different from Company address above): _____

City/ST/Zip: _____ Country: _____

From current Company Member: _____

To new Company Member: _____ Member Type: _____

Chapter: _____

Email: _____

Address (If different from Company address above): _____

City/ST/Zip: _____ Country: _____

From current Company Member: _____

To new Company Member: _____ Member Type: _____

Chapter: _____

Email: _____

Address (If different from Company address above): _____

City/ST/Zip: _____ Country: _____

Please check to delete Company Members:

Name: _____ Member Type: _____

Email: _____

Name: _____ Member Type: _____

Email: _____

Name: _____ Member Type: _____

Email: _____

Name: _____ Member Type: _____

Email: _____

(Attach additional sheet if needed)



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TRANSFERS / DELETIONS to EXISTING COMPANY MEMBERSHIP (Page 2)

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MEMBERSHIP QUALIFICATIONS

Professional Members: Shall be individuals actively engaged in the management of residential properties as an agent for others. The individual must follow his/her specific state regulatory licensing law regarding licensure in performing the duties of a property manager. Professional Members have completed a course of instruction covering the NARPM® Code of Ethics.

A Professional Member may also be an employee of a company, or employee of a property owner, or employee of an investor, who handles all aspects of residential property management. These individuals must comply with state licensing laws, but do not hold an active real estate license.

Affirmation of Eligibility: Whereas, I wish to hold membership in the National Association of Residential Property Managers and whereas, I am actively engaged in the management of residential properties in which I do not have an ownership interest, I do hereby affirm that I fully understand the requirements of the licensing laws of the State of _____ and affirm that I am now and will continue to be in compliance with those laws during my membership. Initial your affirmation here _____

Support Staff Members: Shall be individuals acting in the role of support in the office of a Professional Member and the Support Staff Member must not be acting in a capacity requiring licensure according to his/her state's regulatory licensing law. A Support Staff Member does not vote or hold office.

Residential Resources will be delivered electronically. If company requests, up to four (4) copies can be mailed to office address.

Responsible person understands the company will be charged the dues base on fee equaling \$735.00. After the company membership base fee is paid for initial four (4) members, the dues will be \$100 for each additional Professional Member/Support Staff. All members will be listed under the company address.

Dues are nontransferable and nonrefundable. NARPM® dues are not deductible as a charitable contribution for federal tax purposes, but may be deductible as a business expense. Under IRS rules IR-93-98 and notice 93-55, the federal government requires exempt organizations to estimate the percentage of a member's dues utilized for lobbying purposes and not deductible as a business expense. It has been determined that 100% of your NARPM® dues is deductible as a business expense.

I understand that membership in the National Association of Residential Property Managers is limited to real estate professionals, their support staff. I agree that all members in my company will abide by the NARPM® Code of Ethics. I affirm that the information contained herein is true and accurate. By holding Company Membership, all members in the company agree to allow NARPM® to send PAC solicitations.

Signature of Applicant: _____ Date: _____

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