



Home Builders Association of Ames Application for Membership

Mail application and check to: AHBA, PO Box 864, Ames, IA 50010

Date _____
Name _____
Title _____
Company name _____
Business address _____
City, State, Zip _____
Telephone _____
Fax _____
Company Email _____
Website _____

Contact & Phone _____
Mobile phone _____
Contact Email _____

Please describe what your business is, what you do, past projects and what HBA members you might have done business with.

I agree to abide by the Constitution and By-laws of the Home Builders Association of Iowa to which this membership application is directed and to the National Association of Home Builders of the United States with which it is affiliated.

A remittance of \$470.00 for Associate membership or \$470.00 for Builder membership accompanies this application.

My Membership sponsor is: _____
Name of current HBA member who is sponsoring you

Applicant Signature _____

Membership dues payments to the Home Builders Association of Ames are not deductible as charitable contributions for federal income tax purposes. HOWEVER, dues payments may be deductible as ordinary and necessary business expense, subject to exclusion for lobbying activity. A portion of your dues is used for lobbying by NAHB and HBAI. HBAI pays the necessary proxy tax on all State memberships for lobbying activities.

MEMBERSHIP CLASSIFICATION (enter your classifications from the list below)

_____ **Builder Member**
 _____ Primary Business Code
 _____ Secondary Code
 _____ Third Code

_____ **Associate Member**
 _____ Primary Business Code
 _____ Secondary Code
 _____ Third Code

Code	Description	Code	Description	Code	Description	
A	Single Family Bldr – Spec (attached or detached)	L	Accounting		Subcontractors & Specialty Trade Contractors	
B	Single Family Builder – Custom	M	Architects, Planners, Designers, Engineers	W1		Carpentry
C	Multifamily Builder Sale Units	N	Attorneys	W2		Electrical
D	Multifamily Builder/Owner Rental Units	O	Computer Products & Services	W3		Flooring
E	Multifamily Contractor – Rental or Sale	P	Financial Services	W4		Landscaping
F	Remodeler - Residential	Q	Insurance & Title Contractors	W5		Plumbing, Heating and Air Conditioning
G	Remodeler - Commercial	R	Marketing, Advertising & Public Relations	W6		Roofing & Siding
H	Commercial Builder (own account)	S	Product Manufacturers & Representatives	W7		All Other Subcontractors
I	Commercial Contractor (other investor)	T	Property Management			Wholesale Dealers / Distributors
J	Land Developer	U	Real Estate Brokers & Agents	X1		
K	Home & Building Manufacturer		Retail Dealers / Distributors	X2	Building Materials	
		V1	Appliances	X3	Floor Coverings	
		V2	Building Materials / Lumber	X4	Paint / Wall Coverings	
		V3	Floor Coverings	X5	All Other Wholesale Dealers	
		V4	Paint / Wall Coverings	Y	Utilities	
		V5	All Other Retail Dealers	Z	All Other	

(Please Specify)

ANNUAL DOLLAR AMOUNT: Circle your approximate annual dollar amount of revenue.

1. Under \$250,000
2. \$250,000 - \$600,000
3. \$600,000 - \$1 million
4. \$1 million - \$5 million
5. Over \$5 million

ANNUAL NUMBER OF RESIDENTIAL DWELLING UNITS BUILT: Builders ONLY – Circle One

- | | | | |
|----------|----------------|----------|------------------|
| 1 | 0 units | 4 | 26 to 100 units |
| 2 | 1 to 10 units | 5 | 101 to 500 units |
| 3 | 11 to 25 units | 6 | over 500 units |

TOTAL NUMBER OF PAID EMPLOYEES, INCLUDING THE MEMBER _____

BUSINESS TITLE: Check One

- _____ 1 - President/CEO/Owner/Principle/Partner
- _____ 2 - VP / General Manager
- _____ 3 - Construction Superintendent
- _____ 4 - Sales & Marketing Manager
- _____ 5 - Architect/Designer/Engineer
- _____ 6 - Financial Manager
- _____ 7 - Other Management Personnel
- _____ 8 - Non-Management Personnel
- _____ 9 - Other _____

(Please Specify)

HOW MANY YEARS IN BUSINESS _____

Thank you!