

# MEMBERSHIP APPLICATION FOR THE BRISTOL NORFOLK HOME BUILDERS ASSOCIATION, INC.

65 NEPONSET AVENUE SUITE 3  
FOXBOROUGH, MA 02035-4022

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FAX: 508.543.2412 www.bnhba.com



NAME: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Last, First, MI) (MM / DD / YYYY)

STREET: \_\_\_\_\_ UNIT/APARTMENT: \_\_\_\_\_

CITY / TOWN \_\_\_\_\_ STATE: \_\_\_\_\_ (ZIP + 4): \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

FIRM / EMPLOYER NAME: \_\_\_\_\_ YOUR TITLE \_\_\_\_\_

FIRM STREET: \_\_\_\_\_ UNIT/APARTMENT: \_\_\_\_\_

FIRM CITY / TOWN \_\_\_\_\_ STATE: \_\_\_\_\_ (ZIP + 4): \_\_\_\_\_

FIRM PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

FIRM E-MAIL: \_\_\_\_\_ WEB URL: \_\_\_\_\_

BRIEF DESCRIPTION OF OPERATIONS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HOW LONG HAVE YOU BEEN DOING THIS WORK? \_\_\_\_\_ AT THIS FIRM? \_\_\_\_\_

CSL #: \_\_\_\_\_ Date Issued: \_\_\_\_\_ HIC #: \_\_\_\_\_ Date Issued: \_\_\_\_\_

SPONSOR (if any): \_\_\_\_\_ FIRM: \_\_\_\_\_

BANK / CREDIT REFERENCE: \_\_\_\_\_

PERSONAL REFERENCE: \_\_\_\_\_

I agree to abide by the CODE OF ETHICS and BY-LAWS of: the Bristol Norfolk Home Builders Association, Inc., the Home Builders Association of Massachusetts, and the National Association of Home Builders Of The United States, with which the Bristol Norfolk Home Builders Association, Inc. is affiliated. A remittance of \$495.00 representing my annual membership dues in the affiliated Associations, accompanies this application. Please make check payable to: BNHBA, INC., or join online at **bnhba.com**. Dues payments to your local Builder Association are not deductible as charitable contributions for Federal Tax purposes. However, dues payments may be deductible by members as an ordinary and necessary business expense. Please consult your tax professional for advise.

\_\_\_\_\_  
YOUR SIGNATURE DATE: \_\_\_\_\_  
(MM / DD / YYYY)

----- For Office Use Only -----

NAHB MEMBERSHIP IDENTIFICATION CODE: \_\_\_\_\_  
1 2 3 4 5 6 7 8 9 10 11

APPROVED BY MEMBERSHIP CHAIR: \_\_\_\_\_ Date: \_\_\_\_\_