



OAHU CHAPTER

National Association of Residential Property Managers

AFFILIATE MEMBERSHIP APPLICATION & RENEWAL

Contact Name: _____ Title: _____

Company Name: _____

Mailing Address: _____

Company Phone: _____ Ext: _____ Fax: _____

E-mail: _____ Website: _____

Licenses Type (Contractor, Business, etc...) & Number (License #, General Excise Tax, etc...) if applicable: _____

Describe your product/service: _____

Referred By: _____

Please select (no more than two) categories from the following chart that you would like to have your company listed under on the NARPM – Oahu Chapter website:

- | | | |
|--|---|---|
| <input type="checkbox"/> Accounting / Bookkeeping Services | <input type="checkbox"/> Garage Doors | <input type="checkbox"/> Maintenance/Handyman |
| <input type="checkbox"/> Advertising / Publisher | <input type="checkbox"/> Gutters | <input type="checkbox"/> Painter (Licensed) |
| <input type="checkbox"/> Appliances - New | <input type="checkbox"/> Sewer Inspection & Maintenance | <input type="checkbox"/> Pest & Termite Treatment |
| <input type="checkbox"/> Banking / Financial Service | <input type="checkbox"/> Towing | <input type="checkbox"/> P.M. Software / Internet Solutions |
| <input type="checkbox"/> Business Products/Services | <input type="checkbox"/> Insurance (Health/Life/Property) | <input type="checkbox"/> Remote Staff/Answering Service |
| <input type="checkbox"/> Flooring / Upholstery Cleaning | <input type="checkbox"/> Janitorial/Maid Services | <input type="checkbox"/> Roofer (Licensed) |
| <input type="checkbox"/> Emergency Services | <input type="checkbox"/> Lawn/Landscaping Services | <input type="checkbox"/> Security Products & Services |
| <input type="checkbox"/> Eviction Services | <input type="checkbox"/> Legal | <input type="checkbox"/> Website Development |
| <input type="checkbox"/> Flooring Replacement Options | <input type="checkbox"/> Locksmith | <input type="checkbox"/> A/C Install, Repair, Service |
| <input type="checkbox"/> Water Restoration Services | <input type="checkbox"/> Fire/Mold Restoration & Repair | <input type="checkbox"/> Plumbing & Drain Cleaning Services |
| <input type="checkbox"/> Pressure Washing Services | <input type="checkbox"/> Satellite Solutions | <input type="checkbox"/> General Contractor (Licensed) |
| <input type="checkbox"/> Duct & Ventilation Cleaning | <input type="checkbox"/> Recycling & Disposal Services | <input type="checkbox"/> Electrical Contractor (Licensed) |
| <input type="checkbox"/> Real Estate Appraisal & Consultant Firm | <input type="checkbox"/> Interior Improvements | <input type="checkbox"/> Office Operations Support |
| <input type="checkbox"/> Tenant Screening & Employment Background Checks | | <input type="checkbox"/> Environmental Consulting & Clean-Up |
| | | <input type="checkbox"/> Cash Flow Management Program/Collection Agency |
| <input type="checkbox"/> OTHER: _____ | | |



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MEMBERSHIP & DUES

Membership & Dues are applicable to the current calendar year beginning in January and ending in December.

LEVEL ONE	❖ Company listing on www.oahu.narpm.org	\$125.00
LEVEL TWO	<ul style="list-style-type: none"> ❖ Company listing on www.oahu.narpm.org ❖ Monthly Luncheon Discount rates for two (2) Company Representatives ❖ Opportunity to make a 1-Minute company presentation at Monthly Luncheons at least seven (7) times a year ❖ Encouraged to provide company information and promotional materials at Monthly Luncheons ❖ If the Affiliate RSVPs by the Friday before the Monthly Luncheon they may display Company Information on ½ of a 6' White Table 	\$225.00

Membership and Dues are non-transferable & non-refundable.

I understand that Affiliate Membership in the Oahu Chapter of the National Association of Residential Property Managers (NARPM) is in a non-voting capacity and is limited to those professionals who provide a service to the Property Management industry. I understand that my application must be accepted and approved by the NARPM - Oahu Chapter Board of Directors and I agree to abide by their decision. Affiliate members cannot use the NARPM logo. I am aware I am only an Affiliate Member of NARPM - Oahu Chapter and not a National NARPM Affiliate. I affirm that the information contained herein is true and accurate.

Signature of Applicant: _____

PAYMENT METHOD

Make check payable to: "NARPM-Oahu Chapter".

CHECK _____ Check enclosed in the amount of \$125.00. Check # _____

ONE:

_____ Check enclosed in the amount of \$225.00. Check # _____

Mail Payment & this Completed Form to: **Gustafson Real Estate LLC**
PO Box 940
Pearl City, HI 96782-0940

Payment must accompany application and will be refunded if application is not accepted.