



APPLICATION FOR MEMBERSHIP COLUMBIA REMODELERS

Affiliated with the HBA of Greater Columbia and NAHB Remodelers

Executive Committee Approval: _____
Date Initial

Application Date: _____

Company Name: _____ Phone: _____

Name/Title _____ Fax: _____

Business Location: _____
Street City State Zip Code

Mailing Address: _____
Street City State Zip Code

E-mail address: _____

Company Website: _____

Membership Class: [] Remodeler (SC License Number: _____)
[] Associate

Type of Business: _____

How long have you been in this business? _____ ...In remodeling? _____

List Two (2) Customer References

Name _____ Phone _____ Job Completed _____
Date

Address _____
Street City State Zip Code

Name _____ Phone _____ Job Completed _____
Date

Address _____
Street City State Zip Code

I agree to abide by the By-Laws of the Columbia Remodelers council and those of the NAHB Remodelers. I further certify that the information provided above is complete and correct to the best of my knowledge.

Signature _____

Remittance of **\$95.00** representing my annual membership dues accompanies this application.
Credit Card payments are accepted. Visa or MasterCard only. Call for CC form.
A 3% processing fee will be applied on Credit Card payments.

Sponsor (Name/Company): _____

For more information please call Bin Wilcenski at (803) 256-6238.
Please return to: Columbia Remodelers, P.O. Box 725, Columbia, SC 29202
Visit our website at www.remouncil.com