

To be eligible to apply for affiliate membership you need to be actively involved in providing professional services to the property industry.

1. Personal Details

Title: Mr Mrs Ms Miss Dr
Middle Name: _____
Preferred Name: _____

First Name: _____
Surname: _____
Date of Birth: _____

Preferred Mailing Address:

Residential Business

Residential Address

Address: _____ Suburb: _____
Town/City: _____ Postcode: _____
Home Phone: _____ Mobile: _____
E-mail Address: _____

Business Address (If applicable)

Name of Employer (Include Self Employed) _____
Postal address: _____ Suburb: _____
Town/City: _____ Postcode: _____
Work Phone: _____ Fax: _____

2. Professional Community

Please tick which professional community best describes your current area of specialisation.

- Property and Facilities Management IPMA (Independent Property Managers Association)
 Property Advisory Infrastructure, Plant & Machinery Valuation
 None of the above (Please indicate) _____

3. Qualifications

Please state the number of years you have been working in a property related field: _____

4. Referees

Please give details of any qualifications you currently hold: _____

Please supply details of two acceptable character references. (Preferably PINZ members)

1. Name: _____
Phone: _____
How do you know the applicant? _____

2. Name: _____
Phone: _____
How do you know the applicant? _____

Have you ever been convicted of an offence punishable by imprisonment for a term of 3 months or more? Yes No

Have you ever been adjudged bankrupt or entered into a composition with your creditors? Yes No

I confirm that the information supplied in this application form is true and correct to the best of my knowledge. I am familiar with the rules of the Institute and undertake to abide by them if my application is accepted.

Signed: _____ Date: _____

When your form has been submitted for processing you will be invoiced for an application fee of \$125.00. (PINZ annual membership fees will apply upon approval).

Send completed application to:

membership@property.org.nz

or

PINZ PO Box 5304, Wellington 6145, New Zealand

or

Physical address:

Level 3, Gleneagles Building, 69 The Terrace Wellington 6011, New Zealand

New IPMA members please include the following information with your application:

- A scanned copy of your Professional Indemnity & Public Liability Insurance.
- A copy of a credit check - no more than one month old.
Veda Advantage or similar
- A copy of a recent criminal history check (We will offer provisional membership pending completion).
Police checks can be requested from this Department of Justice website
- A copy of separate designated account details specifically for rents ('trust' account).
- If you are an employee of a Property Management firm please complete this additional requirement.

I _____ managing director of _____
confirm that the submitted account details are true and accurate as of _____.

I confirm that the information supplied in this application form is true and correct.

I am familiar with the IPMA Code of Ethics & Code of Practice. I will adhere to them if my application is accepted.

Signed: _____ Date: _____