

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  PROMINZ (Property Managers Institute of New Zealand)  
 Property Advisory  Plant & Machinery Valuation  
 None of the above (Please indicate) \_\_\_\_\_

Please state the number of years you have been working in a property related field: \_\_\_\_\_  
Please give details of any qualifications you currently hold: \_\_\_\_\_

## 3. Qualifications

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

## 4. Referees

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](mailto: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

**PROMINZ 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 offer provisional membership pending completion). Police checks can be requested from the 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 \_\_\_\_\_

- I confirm that the submitted account details are true and accurate.

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

Signed: \_\_\_\_\_ Date: \_\_\_\_\_