

MEMBERSHIP APPLICATION

MeCHIPs was founded in January 1999 with a goal to create a professional forum for the exchange of information regarding the Home Inspection industry and to effectively represent Home Inspection Professionals. MeCHIPs holds seven Business Meetings per year and sponsors several Professional Development Seminars each year.

For dues of \$95.00 a year, payable in January, members receive:

Notice of the meetings to be held each year (usually first Tuesday of the month, October - April) Meeting Minutes and Updates

MeCHIPs Bylaws, Standards of Practice, and Code of Ethics (available at www.mechips.org)

An opportunity to meet and network with other Home Inspection Professionals

An opportunity to earn Continuing Education Credits (CEUs)

Professional Membership requires complying with the Bylaws, Standards of Practice, and Code of Ethics; using a written home inspection report; earning 48 CEUs over a 3-year period; utilizing a written contract (with arbitration clause) with clients; and shall have passed the "National Home Inspector Examination" and have performed a minimum of 25 paid home inspections [submit list], and may be required to submit a few written inspection reports at random as determined by Board of Directors. Candidate members must comply with the Bylaws and Code of Ethics. Other trade associations (ASHI, NAHI, InterNACHI, etc.) routinely recognize MeCHIPs meetings for CEUs. Affiliate membership is available for those not actively engaged in the home inspection business.

Application is for (check one): __Professional member __Candidate member (yet to pass exam) __Affiliate member

I, the undersigned applicant, hereby declare that the information contained in this application is true and that I will use, as applicable, the most recent edition of the MeCHIPs Standards of Practice and Code of Ethics as guidelines to perform home inspections. I further agree to hold MeCHIPs and its Directors and Officers harmless in the event of a claim or proceeding arising out of the performance of service for clients referred to me because of MeCHIPs. I authorize MeCHIPs to investigate and confirm the information declared by me in this application.

Business Name:	
How long in Business:	yr. Part/Full Time:
Your Name:	
Address:	
City	StateZip
Business Phone: ()	Home Phone: ()
Fax: ()	E-Mail
Signature:	Date:

NOTE: If applying for Professional Member, include a copy of a written inspection report you provide to your clients, a copy of the written contract (with arbitration clause) with your clients and test score of a recognized home inspector exam or an approved exam that you have passed. Correspondence course study is not acceptable.

MAIL COMPLETE APPLICATION ALONG WITH YOUR MEMBERSHIP DUES TO: MeCHIPs, 60 Western Avenue, Suite 3, #222, Augusta, ME 04330

Updated: 1/15/201860

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