



HONOLULU BOARD OF REALTORS®

OFFICE APPLICATION (AFFILIATE)



\$90 APPLICATION

New or reinstating offices and branch offices must submit payment with office

NAME OF OFFICE: _____

TYPE OF BUSINESS:

- | | | |
|-----------------------------|----------------------------------|-------------------------|
| 01 Financial Services | 07 Home Furnishings | 13 Building Contractors |
| 02 Title & Escrow Companies | 08 Advertising & Marketing | 14 Moving Companies |
| 03 Appraisers | 09 Home Repair & Maintenance | 15 Travel & Leisure |
| 04 Home Inspection Services | 10 Residential Property Managers | 21 1031 Exchange |
| 05 Home Warranty Companies | 11 Developers | OTHER (please specify) |
| 06 Legal Services | 12 Commercial Prop. Managers | |

BUSINESS ADDRESS:

STREET ADDRESS _____ SUITE _____

CITY _____ STATE _____ ZIP CODE _____

MAILING ADDRESS:

STREET ADDRESS _____ SUITE _____

CITY _____ STATE _____ ZIP CODE _____

OFFICE PHONE NUMBER: _____ **FAX NUMBER:** _____

E-MAIL ADDRESS: _____ **OTHER (Identify):** _____

WEB SITE ADDRESS: _____

MEMBERS: Please list the affiliate members with your company.

PRIMARY MEMBER: _____

ADDITIONAL MEMBERS:

Please attach additional sheet if needed.

Signature of Primary Member

Date



Honolulu Board of Realtors®

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