## Canadian Association of Home & Property Inspectors (CAHPI-Atlantic) <a href="https://www.cahpi-atl.com">www.cahpi-atl.com</a>

## **MEMBERSHIP APPLICATION**

First Name:			Last Name:		
Company Name:					
Street Address:					
City: Province:			ostal Code:		
Home Phone:	( )	- Business Phone:	( ) -	Fax: <u>(</u>	) -
Cell Phone:	( )	- Email:			
Please complete	the deta	ails below and return. ( <i>Note: Inc</i>	omplete application	ns will not be p	rocessed)
Application Type	::	Renewal I	<b>New</b> (fill in the requ	ired informatio	on below)
For New Applicat	tions or	ıly:			
		AHPI-Atlantic, all applicants must have a ble to provide two (2) written reports, w			
		<b>Prior Certified Training</b>		5	
		Full Recognized Home Inspe	ction Course	7	
		50 Mentored Inspections (by	y RHI Member <b>)</b>	4	
		Errors & Omissions Insuranc	e (E&O)	3	
		Defect Recognition & Report	ting Course	3	
	Successful Completion of CAHPI or ASHI Exam			3	
		Franchise Training (from app	3		
		WETT Certification			
		<b>Building Official</b>		3	
		Current St. John Ambulance	First Aid / CPR	1	
The individual me	embers	hip fee is: \$425. <sup>00</sup> + HST per yea	ar		
Make <i>certified ch</i>	<b>reque</b> p	ayable to <b>CAHPI-Atlantic</b> and ret	urn application to:		
		Mr. Blaine President 24 Birch S Truro, NS	of CAHPI-Atlantic Street		
I hereby apply for I certify that the i	r memb informa	certified cheque payable to Cership in the Canadian Association contained is true: I have realards of Practice of CAHPI-Atlant	CAHPI-Atlantic in the tion of Home & P d, understand, and	roperty Inspe	ectors-Atlantic.
Signature:			Date:		