



2012 Owner/Operator Membership

Owner/Operator membership is open to any individual or corporation which owns, builds, develops, manages, or supervises the operation of multi-family/single family rental housing comprised of 100 units or larger in the Piedmont Triad area. As an owner/operator member, you can expect:

- **Legislative Representation** on the local, state, and national level. We take a proactive stance to help keep you up-to-date and informed on issues and activities that could possibly affect the operation of your business.
- **Education Opportunities** include the Certified Apartment Portfolio Supervisor (CAPS), Certified Apartment Manager (CAM), Certificate for Apartment Maintenance Technician (CAMT) and National Apartment Leasing Professional (NALP) programs plus various other seminars and programs designed to keep your employees at the top of the game.
- **Legal Forms** include standardized North Carolina and National lease forms, lease software, resident applications, condition checklists, and accord and satisfaction agreements that are recognized and understood by our local magistrates.
- **Monthly Membership Meetings** bring to the forefront educational and informative speakers while providing a networking forum for you to meet and exchange ideas with other industry professionals. A wide variety of topics are explored and the meetings are packed with value.
- **Bimonthly Triadvocate Magazine** keeps you informed of current industry related issues and upcoming PTAA events, and provides educational articles in every issue.
- **Semi-Annual Market Surveys** provide a complete overview and full details of multi-family housing data including projected starts, projects completed, vacancy and rental rates, and economic/demographic information. These reports are produced in the spring and fall and are available for purchase at a special members only price.

3-in-1 Membership

Your PTAA membership includes membership in the National Apartment Association and the Apartment Association of North Carolina. NAA represents your interests on the national level, while providing a multitude of educational and support services. AANC represents your interests on the state level. Our professional lobbyists monitor, support, and initiate legislation on behalf of your interests.

Membership Application

Annual Dues: (subsequent years billed Jan. 1)

Base	for more than 100 units	\$450.00 base dues	
Plus	\$3.05 per unit x _____	+ \$ _____ per unit dues	
	# units		
		\$	Total Yearly Dues

To prorate dues, divide Total Yearly Dues by 12 and then multiply by the remaining months in the calendar year.

Prorated Dues = \$

Contact Name: _____

Company Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Email: _____ Referred by: _____

Total# of communities: _____ Total# of units: _____

The information on this application form is correct and may be used to contact this company regarding PTAA business, training, events, legislative alerts, etc.

Authorizing Signature: _____ Date _____

Community: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____ Website: _____

Property Manager: _____ Email: _____

Check one: Conventional _____ Student Housing _____

Subsidized (Section 8, Tax Credit) and percentage of units that are subsidized _____

Year built: _____ # of Units: _____

Community: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Property Manager: _____ Email: _____

Check one: Conventional _____ Student Housing _____

Subsidized (Section 8, Tax Credit) and percentage of units that are subsidized _____

Year built: _____ # of Units: _____

Community: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Property Manager: _____ Email: _____

Check one: Conventional _____ Student Housing _____

Subsidized (Section 8, Tax Credit) and percentage of units that are subsidized _____

Year built: _____ # of Units: _____

Community: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Property Manager: _____ Email: _____

Check one: Conventional _____ Student Housing _____

Subsidized (Section 8, Tax Credit) and percentage of units that are subsidized _____

Year built: _____ # of Units: _____

Remit this form and check to: Piedmont Triad Apartment Association, 7015 Albert Pick Rd, Ste D, Greensboro, NC 27409. Or complete the information below for credit card payment.



Charge to my credit card (Circle one: VISA or MC).

Name as it appears on card: _____

Card Number: _____

Expiration date: _____ CVS: ___ ___ Phone: _____

Signature of cardholder: _____



Contact PTAA at 336-294-4428 or denise@PiedmontTAA.org for more information.