**BOMA MEMBERSHIP APPLICATION**

**LOCAL ASSOCIATION ADDRESS**

**BOMA Westchester County NY, Inc. E-Mail: boma@usa.net**

**PO Box 7250 Phone: 800-726-6224**

**North Arlington NJ, 07031**

NOTE: Please return to local association’s address at left. Dues information provided by local association.

**LOCAL REPRESENTATIVE ADDRESS (PLEASE TYPE OR PRINT)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
| FIRST NAME |  | MIDDLE INITIAL | LAST NAME |  | DESIGNATION(S) |
| TITLE |  |  |  |  |  |
| COMPANY |  |  |  |  |  |
| ADDERSS: STREET |  |  | CITY | STATE/PROVENANCE | ZIP/POSTAL CODE |
| TELEPHONE (MOBILE) |  |  | TELEPHONE (OFFICE) |  |  |
| E-MAIL |  |  | WEBSITE |  |  |
| TYPE OF BUSINESS |  |  | HOW LONG IN BUSINESS |  | NUMBER OF YEARS IN FIELD |

**DEMOGRAPHIC INFORMATION (REQUIRED)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1. Occupation (check one)**  ❍ Building Owner  ❍ Building Manager  ❍ Facility Manager  ❍ Property Manager  ❍ Asset Manager  ❍ Architect  ❍ Appraiser  ❍ Purchasing Agent  ❍ Leasing Agent/Broker  ❍ Investor  ❍ Engineer  ❍ Developer  ❍ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **2. What is your primary type of business or organization? (check one)**  ❍ Property management  ❍ Real estate management  ❍ Manufacturer  ❍ Banker  ❍ Real estate broker  ❍ Insurance  ❍ Communications services  ❍ Real estate investment  ❍ Distributor/rep.  ❍ Government  ❍ Utility  ❍ Education  ❍ Architect  ❍ Consultant  ❍ Contractor  ❍ Health care  ❍ Association  ❍ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **3. How many square feet**  **of office space do you manage? (check one**)  ❍ Less than 50,000  ❍ 50,000 – 100,000  ❍ 101,000 – 300,000  ❍ 301.000 – 600,000  ❍ 601,000 – 1 million  ❍ Over 1 million  **4. How many buildings do you, not your company, manage? (check one)**  ❍ 1  ❍ 2-5  ❍ 6-10  ❍11-20  ❍ 21-50  ❍ Over 50 | **5. What types of properties do you represent? (check all that apply)**  ❍ Government buildings  ❍ Medical buildings/ Hospitals  ❍ High-rise commercial Office  ❍ Low-rise commercial Office  ❍ Suburban buildings/ Office parks  ❍ Shopping centers/ Malls  ❍ Schools, colleges, universities  ❍ Office condominiums  ❍ Parking facilities  ❍ Warehouses  ❍ Hotels  ❍ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **6. Where are your properties located? (check one)**  ❍ Downtown  ❍ Suburbs  ❍ Combination  **7. What is the maximum purchase you can authorize? (check one)**  ❍ Less than $5,000  ❍ $5,000-$10,000  ❍ $10,001-$20,000  ❍ $20,001-$50,000  ❍ $50,001-$100,000  ❍ $100,001-$250,000  ❍ $250,001-$500,000  ❍ $500,001-$750,000  ❍ $750,001-$1 million  ❍ Over $1 million |

**8.** TOTAL BUILDING RENTABLE AREA: \_\_\_\_\_\_\_\_\_\_\_\_\_ **SQ. FT** BUILDING OFFICE AREA: \_\_\_\_\_\_\_\_\_\_\_\_\_ **SQ. FT** BUILDING RETAIL AREA: \_\_\_\_\_\_\_\_\_\_\_\_\_ **SQ. FT**

❍ I UNDERSTAND THAT BY PROVIDING MY MAILING ADDRESS, EMAIL ADDRESS, AND TELEPHONE NUMBER, I CONSENT TO RECEIVE COMMUNICATIONS BY OR ON BEHALF OF BOMA VIA REGULAR MAIL, EMAIL, AND/OR TELEPHONE.

**I hereby request membership in the Building Owners and Managers Association**

|  |  |
| --- | --- |
|  |  |
| APPLICANT SIGNITURE | DATE OF APPLICATION |

Logo

Description automatically generatedCANDIDATE REFERED BY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTE: A percentage of your dues payment to BOMA is not deductible for federal income tax purposes as an ordinary and necessary business expense. Contributions or gifts to BOMA are not deductible as charitable contributions.

2024 DUES DEDUCTIBILITY: As of result of changes adopted as part of the Tax Reform Act of 1993, 4.25% of your dues payment to BOMA is not deductible by members as ordinary and necessary business expenses. Please contact your tax advisor for further information.