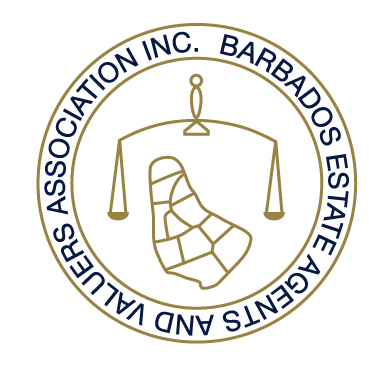
# BEAVA MEMBERSHIP APPLICATION FORM

****

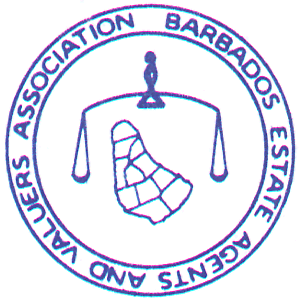
*THE BARBADOS ESTATE AGENTS AND VALUERS ASSOCIATION INC*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ApplicaTION: REAL ESTATE AGENT Information | | | | | | | | | | | | | | |
| Profession  (Pls.Check) | | COMPANY QUALIFYING BROKER  BROKER  TRAINEESALESPERSON  SALESPERSON  AUXILLARY (Ins. Banks)  ASSOCIATE (DEVELOPER)  PROPERTY MANAGER | | | | | | | | | | | | |
| Last Name (Mr.,Mrs.,Ms.Miss) | |  | | | | First Name | |  | | | M.I. |  | Date of Birth | ---/---/----  D / M / Y |
| Citizen of | |  | | | | | | | | | | | | |
| **CONTACT INFORMATION** | | | | | | | | | | | | | | |
| Present Employers Name | |  | | | | | | | | | | | | |
| Present Employers Address | |  | | | | | | | | | | | | |
| Office No. | |  | | | | | Mobile No. | | |  | | | | |
| Home No. | |  | | | | | E-mail Address (**Please Print**) | | |  | | | | |
| Registration Certif. No. | |  | | | | | | | | | | | | |
| **PRESENT APPOINTMENT** | | | | | | | | | | | | | | |
| TITLE | |  | | | DATE COMMENCED | | | |  | | | | | |
| SCOPE OF RESPONSIBILITIES / TYPE OF WORK | | |  | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | |
| EMPLOYMENT HISTORY | | | | | | | | | | | | | | |
| DATES | | | | | | EMPLOYER | | | | DESCRIPTION OF POST | | | | |
| From |  | | TO |  | |  | | | |  | | | | |
| From |  | | TO |  | |  | | | |  | | | | |
| From |  | | TO |  | |  | | | |  | | | | |
|  |  | |  |  | |  | | | |  | | | | |
|  |  | |  |  | |  | | | |  | | | | |
|  |  | |  |  | |  | | | |  | | | | |
|  | | | | | | | | | | | | | | |
| MEMBERSHIP OF PROFESSIONAL BODIES | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| **BODY** | | TYPE OF MEMBERSHIP | **DATE ADMITTED** | | | | | | | **WHETHER BY EXAMINATION** | | | | |
|  | |  |  | | | | | | |  | | | | |
|  | |  |  | | | | | | |  | | | | |
| **CERTIFICATE** | | | | | | | | | | | | | | |
| **To be signed by any two Full Members of BEAVA Inc. in good standing and at least one of whom does not work at the same company as the applicant.**  **I certify that to the best of my knowledge and belief the information given by the Applicant on this form is correct and I consider him/her to be a fit and proper person for election to the grade of membership for which he/she is applying.** | | | | | | | | | | | | | | |
| DATE | |  | | | | **SIGNED:** | | | | | | | | |
| NAME | |  | | | | | | | | | | | | |
| ADDRESS | |  | | | | | | | | | | | | |
| OFFICE HELD | |  | | | | TEL NO | | | |  | | | | |
|  | | | | | | | | | | | | | | |
| DATE | |  | | | | **SIGNED:** | | | | | | | | |
| NAME | |  | | | | | | | | | | | | |
| ADDRESS | |  | | | | | | | | | | | | |
| OFFICE HELD | |  | | | | TEL NO | | | |  | | | | |
|  | | | | | | | | | | | | | | |
| DATE | |  | | | | **SIGNED:** | | | | | | | | |
| NAME | |  | | | | | | | | | | | | |
| ADDRESS | |  | | | | | | | | | | | | |
| OFFICE HELD | |  | | | | TEL NO | | | |  | | | | |
| **NOTES** | | | | | | | | | | | | | | |
| 1. Please enclose copies of Technical/Academic/Professional certificates and proof of   citizenship/residence.   1. Please note there is a onetime **application fee of $275.00 which** **MUST** accompany the   application form. Subscriptions can be paid after the application has been approved.   1. Annual subscriptions are as follows:   C:\Users\Jeanine\Dropbox (Webstylze)\Beava\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.MSO\97725EA4.gif | | | | | | | | | | | | | | |
| **ANNUAL SUBSCRIPTIONS** | | | | | | | | | | | | | | |
| FULL MEMBERSHIP  *(Q. BROKERS / BROKERS)* | | | | | | BASIC: $500.00 + ADD: $300 = $800.00 | | | | | | | | |
| SALESPERSON MEMBERSHIP | | | | | | BASIC: $500.00 + ADD: $200.00= $700.00 | | | | | | | | |
| ASSOCIATE MEMBERSHIP  *(DEVELOPERS WITH OR WITHOUT Q. BROKER)* | | | | | | BASIC: $500.00 + ADD: $100.00 =$600.00 | | | | | | | | |
| TRAINEE SALESPERSON | | | | | | BASIC: $500.00 (No Gov. Reg. to pay. Must do all Modules within 3 years) | | | | | | | | |
| AUXILIARY MEMBERSHIP *(INSURANCE/BANKS/ETC.)* | | | | | | BASIC: $500.00 + ADD: $100.00= $600.00 | | | | | | | | |
| PROPERTY MANAGERS | | | | | | BASIC: $500.00 + ADD: $100.00 = $600.00 | | | | | | | | |

I hereby apply for membership in the Barbados Estate Agents & Valuers Association Inc. I understand that the $275 application fee which is paid by me/my company, is non-refundable.

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PLEDGES AND PAYMENT OF MEMBERSHIP FEES** | | | | | | | | | | | | |
| **QUALIFYING BROKER** | |  | | | | | | | | | | |
| I AM THE QUALIFYING BROKER REPRESENTING: | | | |  | | | | | | | | |
| **COMPANY BROKER** | | |  | | | | | | | | | |
| **PROPERTY MANAGER** | | |  | | | | | | | | | |
|  | | | | | | | | | | | | |
| **SALESPERSON/AGENT** | | |  | | | | | | | | | |
| **TRAINEE SALESPERSON** | | |  | | | | | | | | | |
|  | | | | | | | | | | | | |
| **ASSOCIATE MEMBERSHIP**  *(DEVELOPERS WITH OR WITHOUT Q. BROKER)* | | |  | | | | | | | | | |
| **AUXILIARY MEMBERSHIP**  *(INSURANCE/BANKS/ETC.)* | | |  | | | | | | | | | |
| I consent and authorize the Association, through its Membership Committee or otherwise, to invite and receive information and comment about me from any Member or other person. I agree that any such invitation shall be conclusively deemed to be privileged and not form the basis of any action by me for slander, libel, or defamation of character.  I acknowledge that if accepted, and I subsequently resign or am expelled from Membership of the Association with an ethics complaint or arbitration request pending, that the Committee of Management may grant conditional renewal of my Membership upon my confirmation that I will submit to the pending ethics or arbitration proceedings and will abide by the decision of the arbitrators.  I also agree, that if I resign or am expelled from Membership without having complied with an arbitration award, that the Committee of Management may grant conditional renewal of Membership upon my payment of the award, plus any costs that have previously been established as due and payable in relation thereto, provided that the award and such costs have not, in the interim, been otherwise satisfied.  I agree to abide by the disciplinary procedures outlined in By Law 2 of the Barbados Estate Agents and Valuers Association Inc. which contains the Rules and Regulations. | | | | | | | | | | | | |
| Has your real estate Certificate obtained in Barbados or your license obtained elsewhere been suspended or revoked? | | | | | | | | | | | | |
|  | | | | | YES | | NO | | |  | | |
| If “Yes, specify the place and date of such action and detail the circumstances relating thereto: | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| Have you ever been convicted of a felony? | | | | | | | | | | | | |
|  | | | | | YES | | NO | | |  | | |
| If “Yes”, give details |  | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| I wish C:\Users\Jeanine\Dropbox (Webstylze)\Beava\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.MSO\847CD052.gif | | | | | | | | | | | | |
| **Signature** |  | | | | | | | **DATE** | | | DD/MM/YY | |
| I certify that my answers are true and complete to the best of my knowledge. | | | | | | | | | | | | |
| For Office Use Only: Interviewer: | | | | | | | | | | | | |
| DATE RECEIVED DD/MM/YY |  | | | | | DATE APPROVED DD/MM/YY | | | | | |  |
| **PLEASE PROVIDE THE FOLLOWING WITH APPLICATION** | | | | | | | | | | | | |
|  | **PHOTO ID/DRIVERS LICENCE / B’DOS ID CARD** | | | | | | | |  | | | |
|  | **VERIFICATION LETTER FROM QUALIFYING BROKER IN COMPANY** | | | | | | | |  | | | |
|  | **COPY OF B’DOS GOVERNMENT REAL ESTATE REGISTRATION CERTIFICATE** | | | | | | | |  | | | |
| **PLEASE RETURN COMPLETED FORM, ALONG WITH YOUR CHEQUE FOR $275.00 APPLICATION FEE PAYABLE TO BEAVA INC., The Address: P.O. BOX 130, WORTHING, CHRIST CHURCH OR # 12 ROCKLEY MEADOW, CHRIST CHURCH.** | | | | | | | | | | | | |

***THE BARBADOS ESTATE AGENTS AND VALUERS ASSOCIATION INC.***



P L E D G E

**I PLEDGE TO FOLLOW, UPHOLD AND BE BOUND BY THE ARTICLES OF ASSOCIATION, BY LAWS, CODE OF ETHICS AND STANDARDS OF PRACTICE OF THE BARBADOS ESTATE AGENTS AND VALUERS ASSOCIATION INC., SO LONG AS I REMAIN A MEMBER OF SAID COMPANY**

**DATED THIS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DAY OF\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_\_**

**SIGNED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NAME OF MEMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NAME OF WITNESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**