



# APPLICATION FOR INDIVIDUAL MEMBERSHIP

**THE ASSOCIATION OF RESIDENTIAL LETTING AGENTS**  
Arbon House, Tournament Court, Edgehill Drive Warwick CV34 6LG  
Telephone: 01926 417790  
Fax: 01926 417789

Please complete this form in **BLOCK CAPITALS** and in black ink

This form should be completed in conjunction with the pages entitled 'Notes for Applicants'

To ensure your application is processed as quickly as possible, please enclose all the relevant information in support of your application:

- Signed Application Form
- Copies of relevant academic certificates (if applicable)
- Payment – Please refer to the 'Notes for Applicants – Payment Guide' to ensure that you send the correct payment.

*If you are a Principal, Partner or Director of your company please also provide the following:*

- Proof of Professional Indemnity Insurance cover
- Evidence of Client Money Protection, or payment of levy & Joining fee.
- Accountants Report for your last full financial year. (ARLA Byelaw- 3 Report )
- Proof of OEA membership / OEA membership number or membership of an alternative approved redress scheme eg RICS.

## **IMPORTANT**

**Please note that all information and payments required MUST accompany this form in order for it to be processed.**

### **Personal Details – Home Address**

Title (Mr, Mrs, Other): \_\_\_\_\_ Forename: \_\_\_\_\_ Surname: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Home Tel: \_\_\_\_\_

Email Address: \_\_\_\_\_

Academic qualifications and professional training (Please note that only relevant qualifications/training will be considered for membership. Please enclose copies of supporting certificates)

### **Employment Details**

Principal       Partner       Director (A Principal, Partner or Director with a financial interest in the company)       Employee

Job Title: \_\_\_\_\_ Total length of experience within letting and property management \_\_\_\_\_ Years \_\_\_\_\_ Months

Company Name & Address: \_\_\_\_\_  
(all correspondence will be sent to this address unless otherwise stated)

Postcode: \_\_\_\_\_ Business Tel: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Web Address: \_\_\_\_\_ Number of Branches: \_\_\_\_\_

Is the company a franchise? YES/NO

**Payment Details** – Details of fees are provided in the **“Notes for Applicants – Payment Guide”** booklet.

- I enclose a cheque for £ \_\_\_\_\_ payable to NFOPP
- I wish to pay by Direct Debit – Please complete the enclosed Direct Debit form.
- I wish to pay by Credit Card/Debit Card (***Please note credit card payments incur a 2.5% surcharge***)

Type of card: Visa       Mastercard       Switch/Delta       Other (please state): \_\_\_\_\_

I authorise you to debit my Credit/Debit card with the amount of \_\_\_\_\_ £ \_\_\_\_\_

Card Account Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Issue Number \_\_\_\_\_ Valid from Date: \_\_\_\_\_  
(Switch cards only) : \_\_\_\_\_ (if applicable)

Name on Card: \_\_\_\_\_ Security Code Request: \_\_\_\_\_  
(last three numbers on the back of your card)

**Declaration and Certification**

I hereby apply for membership, declare and certify that:

I authorise necessary enquiries to be made in connection with this application;

I accept the aims and objectives of the Association and support its endeavours to improve the profession of letting and property management;

I agree to be bound by ARLA Byelaws and to complete the required hours of Continuing Professional Development. I also accept the NFOPP Memorandum and Articles of Association and agree to be bound by the ARLA Byelaws which can be found on the ARLA website at [www.arla.co.uk](http://www.arla.co.uk). and any changes which may be made in the future whilst I remain in membership

I confirm that:-

For a period of 10 years prior to this application I have had no conviction, nor disciplinary action taken against me by an employer, for any criminal offence (excluding any motoring offence not resulting in a custodial sentence) nor have I been guilty of conduct which would bring the Association or myself into disrepute; I am not an undischarged bankrupt nor is there any current arrangement or composition with my creditors; I am not nor have I been a director of a Company which has within the period 10 years prior to this application entered into liquidation whether compulsory or voluntary (save for the purpose of amalgamation or reconstruction of the solvent company) nor had a receiver appointed of its undertaking nor had an administration order made against it nor entered into an arrangement or composition with its creditors; nor have I at any time been disqualified from acting as a Director of a Company nor subject to a warning or banning order from the Office of Fair Trading or the Department of Trade and Industry.

**I authorise ARLA to carry out relevant company/individual credit checks as part of the membership approval process**

If I am subject to any current claim or am aware of any impending claim for professional negligence or loss of money, or if I have been the subject of any investigation by an employer, partner or business associate, the Office of Fair Trading and/or local Trading Standards Office, full details of the circumstances are set out in a report enclosed with the application; all information provided by me in connection with this application is, to the best of my knowledge, correct.

**(For Principals, Partners & Directors only) I confirm that:-**

I hold clients' funds in a separate account and agree to be bound by the requirements of the Association by the production of an accountants report.

**(For all applicants) I confirm that:-**

Should my status change whilst I am a member of the Association I will advise the ARLA of this change.

**Principals, Partners and Directors ONLY:**

I confirm that the following are enclosed with this application:

- Professional Indemnity Insurance
- Evidence of Client Money Protection or payment of levy & joining fee
- ARLA Bye-law 3 Report (Accountant's Report)
- Proof of OEA Membership/OEA membership number or membership of an alternative approved redress scheme eg RICS

**Signature of applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

**NB:** Names and business details of members may be supplied to third parties unless this box is ticked