

Application for Registration

1. Personal Details	Surname:	_ Given Names:
	Preferred Name:	_Title (circle one:) Mr Mrs Ms Miss
	Date of Birth:	_
Residential Address	Address:	
	Town/City:	
	Home Phone:	
	E-mail Address:	
Business Address (If applicable)	Name of Employer (Include Self Employed)	
	Postal address:	Suburb:
	Town/City:	Postcode:
	Work Phone:	Fax:
2. Registration	Property Consultancy	Property Management
	Plant & Machinery Valuation	Facilities Management
3. Admittance 4. Registration requirements	I am presently a Full Member of the Property Institute of New Zealand. I am familiar with the Code of Ethics and Rules of Conduct for the Property Institute of New Zealand and confirm my willingness to abide by them. Attach a letter stating the reasons why you should be admitted to registration under the communities listed above.	
	Annex two examples of work carried out by you in each category applied for. (If annexures are more than two pages, then an executive summary is requested). The Board will treat all examples in complete confidence.	
5. References	Attach two written references testifying as to your professional experience and competence, with such references to be provided from persons for whom you have provided services, or with whom you have had a professional working relationship	
6. Declaration	Have you ever been convicted of an offenc more?	e punishable by imprisonment for a term of 3 months or No
	Have you ever been adjudged bankrupt or Yes	entered into a composition with your creditors? No
	I confirm that the information supplied in this application form is true and correct to the best of my knowledge. I am familiar with the rules of the Institute and undertake to abide by them if my application is accepted.	
Signed:	Date:	
Email comp	pleted application to: membership@property.or	rg.nz or post to 76 Willis Street. Wellington 6011

Under the terms of the Privacy Act 2020, I acknowledge that this information is required for the processing of my application for membership with the Property Institute of New Zealand (PINZ) and that it will be held by PINZ, including its applicable regional branch, as part of its records of my membership. I further understand that this information will be used from time to time for purposes related to my membership, including mailing PINZ publications, newsletters and advice of educational and other matters to me. I acknowledge that my details can be published on the PINZ website as a registered member.