

# 2015 MEMBERSHIP APPLICATION



**SCMHI**

South Carolina  
Modular Housing Institute

PURPOSE: To promote and protect the general welfare of the modular home industry.

TO THE BOARD OF DIRECTORS: The undersigned hereby applies for membership to the SC Modular Housing Institute, a division of the Manufactured Housing Institute of South Carolina, incorporated under the Laws of South Carolina as a non-profit and non-assessable association. The undersigned also agrees to abide by all present and future By-Laws of the Institute, rules and regulations so set by the Board of Directors, to attend meetings whenever possible, to cooperate with fellow members, to conduct business so that its membership and the Institute in no way will be discredited. The undersigned is therefore eligible for application to membership upon approval by the MHISC Board of Directors:

\_\_\_\_\_ RESIDENTIAL BUILDER

\_\_\_\_\_ MANUFACTURER

\_\_\_\_\_ LAND DEVELOPER

\_\_\_\_\_ GENERAL CONTRACTOR

\_\_\_\_\_ RETAILER / DEVELOPER

\_\_\_\_\_ SERVICE / SUPPLIER FIRM  
(Lender, Utility, Product Supplier, etc.)

\_\_\_\_\_ CONTRACTOR / INSTALLER /  
TRANSPORTATION COMPANY

\_\_\_\_\_ ASSOCIATE MEMBER

\_\_\_\_\_ ADDITIONAL INFORMATION CATEGORY  
*Receive information mail-outs for one additional  
member category for only \$150/year.*  
Category: \_\_\_\_\_

In what way is your business related to the modular housing industry? \_\_\_\_\_

FIRM NAME: \_\_\_\_\_

KEY CONTACT: \_\_\_\_\_ TITLE: \_\_\_\_\_

NAME YOU GO BY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

COUNTY: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

PHONE NO: (\_\_\_\_\_) \_\_\_\_\_ FAX NO: (\_\_\_\_\_) \_\_\_\_\_

(SOUTH CAROLINA RESIDENTS)

STATE SENATOR: \_\_\_\_\_

STATE REPRESENTATIVE: \_\_\_\_\_

PLEASE INDICATE OTHER BUSINESS LOCATIONS  
(ATTACH ADDITIONAL SHEET IF NECESSARY):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The Key Contact above is authorized to represent our firm to the SC Modular Housing Institute, a division of the Manufactured Housing Institute of South Carolina. We understand that our representative may be changed upon written notice to the Board of Directors.

Who proposed membership to you in the SCMHI? \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# MEMBERSHIP INVESTMENT

RESIDENTIAL BUILDER / GENERAL CONTRACTOR.....\$295

**DEVELOPER / HOME RETAILER:**

Management Location.....\$275

Additional Locations.....\$175

**MODULAR MANUFACTURERS:.....\$ 125 per floor\***

**(Billed Monthly) Dues are payable on all floors shipped into the state of South Carolina and may not be withheld for any reason.**

*\* Maximum dues per home capped at three floors.*

**LAND DEVELOPER:.....\$300**

**SERVICE AND SUPPLIER FIRMS:.....\$295**

Service / Supply and Associate members: add additional locations to receive magazines and important mail-outs for only \$125 per additional location. Attach name, address, phone and fax.

**CONTRACTOR / INSTALLER / TRANSPORTATION: .....\$295**

**ASSOCIATE MEMBER: .....\$250**

**Additional Category - please add \$150 / year per category and list on front. Check here:**

PLEASE BILL MY:      VISA               MASTERCARD               CHARGE AMOUNT: \_\_\_\_\_

CARD NUMBER: \_\_\_\_\_              EXPIRATION DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

SIGNATURE: \_\_\_\_\_

**MAIL APPLICATION ALONG WITH YOUR CHECK TO:  
SCMHI • P. O. Box 1781 • Columbia, South Carolina 29202**

**FOR MORE INFORMATION CONTACT [info@scmodularhome.com](mailto:info@scmodularhome.com)  
or CALL (803) 771-7823 / FAX 803-771-7023**