



# 2012 Regular Membership Application

557 W. Randolph St., 2nd Floor, Chicago, IL 60661  
 Phone: 312-207-1890 x5 • Fax: 312-207-1891 • Email: Andrea@caapts.org  
 Website: www.caapts.org

Apartment owners and management companies must list all apartments operated in Cook, Lake, DuPage, Will, McHenry, Kane, Kendall and Grundy Counties on the reverse side. If necessary, please make additional copies of page 3 to accommodate all of your company's individual property listings.

Name of Company \_\_\_\_\_  
(Please indicate if your company is Inc. or LLC)

Name of Owner or President \_\_\_\_\_

Company Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ - \_\_\_\_\_ County \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Website \_\_\_\_\_

Main Contact Person (please print) \_\_\_\_\_

Title \_\_\_\_\_ Email \_\_\_\_\_

Additional Contact \_\_\_\_\_ Title \_\_\_\_\_ Email \_\_\_\_\_

Additional Contact \_\_\_\_\_ Title \_\_\_\_\_ Email \_\_\_\_\_

Owner/Management Company Members	Base Fee	Plus \$ Per Total Units
1 - 150 Units	\$300 flat rate	
151 - 500 Units	\$300	\$2.22
501 - 1,500 Units	\$300	\$2.32
1,501 - 2,500 Units	\$360	\$2.22
2,501 - 7,000 Units	\$360	\$1.82
7,001+ Units	\$12,500	

Owner/Management Company Member Dues	Worksheet
Base fee (see schedule)	
Number of units X per unit fee (see schedule)	
New member processing fee	\$50
Total Memberships Dues	

Call the Chicagoland Apartment Association if you need assistance with your membership dues. If you qualify as an apartment owner and as an associate member you must first join as an apartment owner. Your membership in the Chicagoland Apartment Association includes membership with the National Apartment Association (\$.47 per unit goes toward NAA membership) and any other organization with which CAA might affiliate.

Chicagoland Apartment Association estimates that the nondeductible portion of your 2012 dues, the portion which is allocable to lobbying is 20.3%.

In the event of termination of membership in this Association, I/we agree to immediately discontinue use of its logo, forms and membership services.

Notice: The Association's Bylaws and Code of Ethics require that certain disputes and/or controversies be arbitrated.

Print Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Recommended By \_\_\_\_\_

# Code of Ethics

We, the members of the CHICAGOLAND APARTMENT ASSOCIATION, recognizing our duty to the public and the intimate nature of the relationship between the apartment resident and the owner, or manager, and being aware of the vastly increasing role of the apartment industry in providing homes of the future, and in order to provide the multi-housing community with the maximum in quality and service upon the highest standards of honesty and integrity, do hereby bind ourselves with the adoption of this Code of Ethics, agreeing that, so long as we remain members of the CHICAGOLAND APARTMENT ASSOCIATION, and so long as nothing contained herein shall be unlawful, we shall:

1. Promote, employ and maintain a high standard of integrity in the establishment of rental rates and performance of all other rental obligations and services in the operation of our apartment communities.
2. Operate and maintain our apartment communities in a fair and honorable manner, ever mindful of the existence and intent of the Chicagoland Apartment Association; to recognize and comply with this organization's by-laws and operational standard; and, to seek no unfair advantage over any other member of the Chicagoland Apartment Association and to conduct our business in such a manner to avoid controversies, discontent and unrest with and among other members of the Chicagoland Apartment Association.
3. Strive continually to promote the education and fraternity of the membership and to promote progress and dignity of the apartment industry in creating a better image of itself in order that the public may be better served.
4. Seek to provide better values so that an even greater share of the public may enjoy the many benefits of apartment living.
5. Establish high ethical standards of conduct within the apartment industry.
6. Endeavor to expose all schemes to mislead or defraud apartment residents, through advertising or otherwise, by deceptive, misleading, or fraudulent statements, misrepresentations, or implications, unwarranted by fact or reasonable probability.

The powers to interpret, administer and enforce the provisions hereof shall be vested in a committee composed of five owners who shall be appointed annually by the President of the Association, with the power of fining, suspension, or expulsion, after hearing of any member violating the same, or the spirit thereof.

I/We agree to abide by the Ethics Code and Bylaws (and by all amendments thereof) of the Chicagoland Apartment Association. (Notice: The Association's Bylaws and Code of Ethics require that certain disputes and/or controversies be arbitrated.)

Print Name \_\_\_\_\_ Date \_\_\_\_\_  
Signature \_\_\_\_\_

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## Payment Information

Web and Email Address \_\_\_\_\_

Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

BILL ME/COMPANY I understand this commitment is a binding contract for the full purchase amount.

VISA  Mastercard  Amex Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Authorizing Representative Name (print) \_\_\_\_\_

I agree to pay the full amount of purchase and authorize the Chicagoland Apartment Association to process this transaction

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Before filling out the following individual property information, please make enough copies of this form to accommodate all of your company's property listings.

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Name of Property \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_  
# of Units \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_ Chicago Ward # \_\_\_\_\_  
Website \_\_\_\_\_  
Property Managers Name \_\_\_\_\_ Email \_\_\_\_\_  
Maintenance Supervisors Name \_\_\_\_\_ Email \_\_\_\_\_

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Name of Property \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_  
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