



professional home builders institute | your education provider

**2016 Company Renewal Form for the Certification Mark
PHBI accredited MASTER HOME RENOVATOR®**

Corporate Name: _____

Operating as (exact Trade Name used if different from above):

(hereinafter referred to as “the Applicant”)

Address: _____ **City/Town:** _____ **PC** _____

Business Telephone (include area code): _____ **Fax No:** _____

E-mail: _____ **Web Site:** _____

I (insert signing officer’s full name and title) _____

_____ representing the Applicant, hereby applies to the Professional Home Builders Institute of Alberta, (“PHBI”) for certification as a **PHBI accredited Master Home Renovator®** Company.

I confirm the following is true:

1. I am or have a PHBI accredited Master Home Renovator® on staff in a senior management position and the individual’s name and title are _____.
2. The company listed above belongs to a local of the Home Builders’ Association.
1. The company listed above is a member in good standing with The Alberta Renovator Warranty Program, part of The Alberta New Home Warranty Program group of companies. (This is a new requirement effective April 1, 2015. Individuals who started on this certification prior to April 1, 2015 will not be required to meet this requirement).

PHBI reserves the right to establish such further rules, regulations or requirements for use of the Certification and to limit or restrict the Applicant’s use of same as PHBI may determine from time to time.

Applicant: _____ **Date:** _____

PHBI: _____ **Date:** _____

PROFESSIONAL HOME BUILDERS INSTITUTE (PHBI)

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