



Application Form

Date of Application: _____

Name of Member: _____ (Office or Person)

Mailing Address: _____

Phone Numbers

Main: _____

Fax: _____

Email Address: _____
(after setup, additional users can be added.)

Are you a rental property owner? ___Yes ___No

Are you a property manager? ___Yes ___No

Voting District Member is in: _____

If Property Owner, approximate number of rental units owned? _____

If Property Manager, approximate number of rental units managed? _____

*Make payable to WPOMA
Mail Form with Check to Breedlove & Associates, Inc. 616 Broad Street, Wilson NC 27893
Treasury, John Benson
President, Dale Breedlove*

For WPOMA Use:

Date application received: _____

Dues:

Initiation \$250 ck# _____

1st Year Dues \$100 ck# _____

After payment, applicant will be emailed their login with instructions. If they have any questions, please contact Dale at 252-234-6011.

www.wpoma.org

Revised April 2016