

**MEMBERSHIP APPLICATION**  
**CALIFORNIA MOVING AND STORAGE ASSOCIATION**  
 10900 E. 183<sup>rd</sup> Street, #300, Cerritos, CA 90703  
 (562) 865-2900 (800) 672-1415 FAX (562) 865-2944

PLEASE PRINT CLEARLY

Date \_\_\_\_\_

1. Company Name: \_\_\_\_\_ Year Established: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
 Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip+4: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip+4: \_\_\_\_\_  
 County: \_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_  
 Published E-mail Address: \_\_\_\_\_ Website: \_\_\_\_\_

2. Organization: Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Proprietor \_\_\_\_\_

3. List officers or owners (with titles) and check (✓) one person to receive postal mailings. All listed with email addresses will receive chapter meeting notifications, newsletters and announcements via email:

<u>Name / Title</u>	<u>E-mail address</u>
( ) _____	_____
( ) _____	_____
( ) _____	_____
( ) _____	_____

4. If proprietorship, give d.b.a.: \_\_\_\_\_

5. Check best description of your company:	<u>California</u>	<u>Out of State</u>
a. Household goods mover	_____	_____
b. Van Line	_____	_____
c. Independent contractor	_____	_____
d. Freight forwarder	_____	_____
e. Supplier	_____	_____
f. Consultant	_____	_____
g. Other	_____	_____

6. Mailing address and phone number of branches:

Address	Phone	&	Fax
_____	_____		_____
_____	_____		_____
_____	_____		_____
_____	_____		_____

7. Total # of California operated power units including contractors: \_\_\_\_\_ (Movers Only)

8. PUC T File No.: \_\_\_\_\_ (Movers Only)

**NOTE:** Include all California power units whether owned, leased or operated by independent contractors. Do not include forklifts or pickup trucks for non-revenue producing use.

ATTACH A COPY OF YOUR LATEST PUC REPORT OF EQUIPMENT OPERATED.

9. Agent for \_\_\_\_\_ Warehouse capacity \_\_\_\_\_ sq. ft.  
A. Do you have a public scale? \_\_\_\_\_ # Capacity \_\_\_\_\_

10. Monthly dues assessment

A. Active (Mover) Membership:

- 1) Initiation fees (first month only) .....\$10.00 \_\_\_\_\_
  - 2) Base monthly dues.....\$30.00 \_\_\_\_\_
  - 3) Monthly equipment charge (see note below) .....\$7.50 ea. \_\_\_\_\_
  - 4) Branch fee.....\$5.00 ea. \_\_\_\_\_
- Total: \_\_\_\_\_

B. Associate/Affiliate (Supplier) Membership:

- 1) Initiation fees (first month only) .....\$10.00 \_\_\_\_\_
  - 2) Base monthly dues.....\$55.00 \_\_\_\_\_
  - 3) Branch fee .....\$5.00 ea. \_\_\_\_\_
- Total: \_\_\_\_\_

C. Independent Contractor/Owner Operator:

- 1) Initiation fees (first month only) .....\$10.00 \_\_\_\_\_
  - 2) Base monthly dues includes 1 truck.....\$25.00 \_\_\_\_\_
  - 3) Monthly equipment charge (excess of 1 truck).....\$7.50 ea. \_\_\_\_\_
- Total: \_\_\_\_\_

(MAKE CHECK PAYABLE TO: CMSA)

11. **Payment of initiation fee and first month dues** must accompany application.

12. Copy of latest PUC report of equipment operated must accompany application. (Movers Only)

13. Application sponsor:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_

14. I agree to abide by ethical consumer business practices and bylaws of the California Moving and Storage Association. I further understand that the Board of Directors may cancel membership for failure to meet such requirements. **According to CMSA bylaws, cancellation of membership for any reason must be in writing.**

Signature \_\_\_\_\_

**Membership effective month payment received or the first day of the next month if received after the 15th.** Please complete, sign, and return with check and PUC report of Equipment Operated to:

California Moving and Storage Association  
Stephen J. Weitekamp, President  
10900 E. 183<sup>rd</sup> Street, #300  
Cerritos, CA 90703

**NOTE:** Include all California power units whether owned, leased or operated by independent contractors. Do not include forklifts or pickup trucks for non-revenue producing use. Call (562) 865-2900 or TOLL FREE (within CA) (800) 672-1415 if there are questions.

**ASSOCIATE MEMBER APPLICANTS ONLY** – Please mark the appropriate box(es) below. One category listing is free. **Additional category listings cost \$20 per category / per year.**

Name of Company: \_\_\_\_\_

- |                                       |     |                                      |     |
|---------------------------------------|-----|--------------------------------------|-----|
| Attorneys                             | ___ | Mobile Storage                       | ___ |
| Auctioneers                           | ___ | Moving Equipment Rentals             | ___ |
| Citation Prevention                   | ___ | Nevada Movers                        | ___ |
| Claims Adjusting Service              | ___ | Paper Products / Packing Materials   | ___ |
| Computer Services                     | ___ | Payroll Services                     | ___ |
| Consultants                           | ___ | Printing Services                    | ___ |
| Crates / Containers                   | ___ | Recycling Services                   | ___ |
| Custom Trailer Manufacturer           | ___ | Repairs, Sales, Truck, Trailers      | ___ |
| Document Destruction                  | ___ | Telephone Services                   | ___ |
| Drug / Alcohol Testing                | ___ | Third Party Specialty Services       | ___ |
| Freight Forwarders                    | ___ | Truck Sales / Rentals                | ___ |
| Furniture Rental                      | ___ | Uniforms / Apparel / Design          | ___ |
| Independent Contractors               | ___ | Van Line Companies                   | ___ |
| Insurance / Financial Services        | ___ | Vehicle & Boat Relocation            | ___ |
| Leasing – Employee Equipment          | ___ | Warehouse Racking / Rental Equipment | ___ |
| Manufacturer-Commercial Vans / Trucks | ___ | Other _____                          |     |