



# National Association of Public Insurance Adjusters

\* indicates required field. Enter firm information below.

## Public Insurance Adjuster Membership Application

Visit [www.napia.com](http://www.napia.com) to complete a  
membership application online.

Firm Name

Firm Address

City

State

Zip

Firm Phone

Firm Fax

Firm Toll Free/Alt #

Firm Email (if applicable)

Firm Web Address

Firm License # (if applicable)

Enter Primary contact information below

Name	Email	State License #'s	Contact Type
			<input type="checkbox"/> Principal <input type="checkbox"/> Public Adjuster

List all additional principals, licensed public adjuster employees and licensed 1099 employees at firm below.

Name	Email	State License #'s	Contact Type
			<input type="checkbox"/> Principal <input type="checkbox"/> 1099 employee <input type="checkbox"/> Public Adjuster
			<input type="checkbox"/> Principal <input type="checkbox"/> 1099 employee <input type="checkbox"/> Public Adjuster
			<input type="checkbox"/> Principal <input type="checkbox"/> 1099 employee <input type="checkbox"/> Public Adjuster

**For additional members, use a separate sheet of paper**

\* Yes, I would like to apply at the Member Promotional Rate ☐

\* How many licensed Public Adjusters are in your firm? \_\_\_\_\_

\* Does the firm provide public adjuster services exclusively on a licensed and professional basis? ☐ YES ☐ NO  
If no, describe: \_\_\_\_\_

\* Is the firm engaged in or have any interest in building construction or restoration? ☐ YES ☐ NO  
If no, describe: \_\_\_\_\_

\* Has the firm or any of its members ever received a complaint to their licensure authority? ☐ YES ☐ NO

\* Has the firm or any of its members ever applied for membership to their local professional association?  
☐ YES ☐ NO ☐ N/A If yes, which one: \_\_\_\_\_

Why do you want to become a member of NAPIA? \_\_\_\_\_

Referred by: \_\_\_\_\_

**The undersigned applicant agrees to read and abide by the NAPIA Constitution and By-Laws, and  
the NAPIA Rules of Professional Conduct and Ethics adopted and sanctioned, from time to time, by this organization.**

\* ☐ I agree that all information listed on this application is true and accurate.

Applicant Signature

Return membership  
application and three  
professional  
references to:

**NAPIA 1400 Village Square Blvd., Suite 3 #187 Tallahassee, FL 32312**

**EMAIL: [info@napia.com](mailto:info@napia.com)**

# NAPIA Membership and Dues Information

Public adjuster members are firms who employ insurance adjusters on a full-time and professional basis in the adjustment of first party claims for owners of fixed properties-- commercial, industrial, institutional, retail, and/or residential-- that have been damaged by causes covered by insurance.

Public Adjuster members shall not acquire any interest in salvaged property or participate in any way, directly or indirectly, in the reconstruction, repair or restoration of damaged property. .

## Membership Dues:

Annual dues are determined by the number of licensed public adjusters in the organization.

Dues are calculated as follows:

Principal (Regular Member) .....	\$1000
Employee (Associate Member) .....	\$1000
1099 Employee (Independent Contractor Member) .....	\$320
Public adjusters who perform services on a full-time or part-time basis for or on behalf of a public adjusting member firm.	

The maximum amount for any combination of Regular and Associate members is \$10,000 regardless of firm size.

There is a charge of \$290 for each branch office. A firm's web address can be added to its online company listing in the NAPIA membership directory for an additional \$400.

## Membership Promotional Program:

NAPIA is offering a discount that allows public insurance adjusting firms to join at a substantial savings on annual membership dues. New members receive a 50% discount and a free website listing the first year.

Principal (Regular Member) .....	\$500
Employee (Associate Member) .....	\$500
1099 Employee (Independent Contractor Member) .....	\$160

Members may not vote or hold a board position during the year of their discounted membership.

Current members or past members (within three years) are not eligible for this promotion.

**\*If a member is no longer employed with your firm, it is your responsibility to notify us.**

## Application Process:

All applications are forwarded to the membership committee for review. Once an application is approved, annual dues will be calculated and an invoice will be sent to the primary contact listed on the application.

Membership applications that contain inaccurate or incomplete information will be rejected.

## Benefits:

NAPIA offers public insurance adjusters and edge, by providing members with the information, tools, and opportunities that allow them to succeed, including:

- members-only networking events
- discounted rates for conferences and seminars
- use of the association's highly respected logo
- a company listing on the NAPIA website
- semi-annual Consumer Claims magazine
- representation on the national and state levels
- frequent legal, legislative and regulatory updates
- access to public adjusters, attorneys and other first party property insurance resources

Please return the completed membership application with three professional references to:

## NAPIA

**1400 Village Square Blvd.**

**Suite 3 #187**

**Tallahassee, FL 32312**

**EMAIL: [info@napia.com](mailto:info@napia.com)**

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