

# Small Independent/Franchise Motel Association of Houston

(SIMA of Houston)

3421 Antoine Dr, Houston, TX 77092

Sima Member# : \_\_\_\_\_

**Membership Application Form** Council District: \_\_\_\_\_

Please complete and provide all applicable information on this form along with the membership fee. Individual Member information provided below is confidential and for SIMA internal use only.

Motel - Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_

Owner - Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_

Authorized Representative - Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Mobile: \_\_\_\_\_ Pager: \_\_\_\_\_  
Representative's Title: \_\_\_\_\_  
E-mail: \_\_\_\_\_

Number of Rooms: \_\_\_\_\_ The Year Motel was Built: \_\_\_\_\_

Number of years present owner has owned this Motel: \_\_\_\_

Does Owner or Authorized Representative and its family reside at the Motel: Y / N

In last 2 (two) years, Number of time Police is Called and/or Visited your Motel: \_\_\_\_\_

Number of violation citations, if any: \_\_\_\_\_

Average Yearly 2008,

Property Tax paid: \$ \_\_\_\_\_

Total Payroll paid: \$ \_\_\_\_\_

Number of Employees: \_\_\_\_\_ ( Include Working Family Members)

Total Occupancy Tax Paid \$ \_\_\_\_\_ ( Include City State and County )

## **Membership Fee: \$500.00 / 2009**

all properties large or small, Independent or Franchised.

Please make your payment by check. Please make checks payable to - SIMA of Houston.

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

Date: \_\_\_\_\_

Owner / Authorized Representative