

Indiana Association of Building Officials, Inc.

Application for Officer or District Director

Full Name:	Date:
Home Address:	
County of Residence:	Home Phone:
Jurisdiction:	Business Phone:
Will your jurisdiction authorize your participation	on:
Position Applying for: Pres., VP, 2 nd VP, Sec/Tr	reas, District Dir, and Dist. Number/Reg
Number of years employed as a Building Officia	al/Inspector:
Number of years as a member of IABO:	
List any involvement with the Association to da	nte:
Purpose and reason for seeking position:	
' ' '	on in full and attach a resume to support the ion contained herein.
Signature:	

Please return to: IABO 17437 Carey Road #265 Westfield, IN 46074

Ph: (317) 824-0940 Fax: (317) 429-1270 Director@IABO.com