



# Code Officials Conference of Michigan 2017 Request for Honorary Membership

Member name being considered for Honorary Membership: \_\_\_\_\_

Member Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Nominated By (if other than Member): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### General Information about Member

How many years - COCM Member \_\_\_\_\_ Act 54 Registrations Held - BO \_\_\_\_\_ BI \_\_\_\_\_ PR \_\_\_\_\_ EI \_\_\_\_\_ MI \_\_\_\_\_ PI \_\_\_\_\_

Jurisdiction name retired from: \_\_\_\_\_ Retirement Date \_\_\_\_\_

Jurisdictions employed by during years in code enforcement? \_\_\_\_\_ Number of years? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Other Code Official Organization Memberships?

\_\_\_\_\_  
\_\_\_\_\_

### Notable Accomplishments during Career:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Any additional information about the member that you wish to provide  
can be provided on a separate page, please attach to this form.*

**Must be received prior to Annual Fall Conference**

Please mail to:  
COCM  
P.O. 6433  
Plymouth, MI 48170

[Cocm1@yahoo.com](mailto:Cocm1@yahoo.com)

[www.cocm.org](http://www.cocm.org)

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