



PACNY

PROFESSIONAL ABATEMENT CONTRACTORS OF NEW YORK, INC.

*"DEDICATED TO MAINTAINING THE HIGHEST STANDARDS AND REPUTATION
IN THE ENVIRONMENTAL REMEDIATION INDUSTRY"*

PUBLIC ENTITY EMPLOYEE/INDIVIDUAL APPLICATION

IMPORTANT: All information requested shall be held strictly confidential and shall be used for the sole purpose of determining the qualifications of a prospective member.

INDIVIDUAL'S NAME _____

ADDRESS _____

DAY TEL (____) _____ EVE TEL (____) _____ FAX NO (____) _____

RESIDENCE EMAIL _____ EMPLOYMENT EMAIL _____

PLACE OF EMPLOYMENT _____ POSITION _____

EMPLOYER'S ADDRESS _____

FORMER EMPLOYMENT _____ NO OF YEARS _____

PACNY MEMBERS AS REFERENCES _____

OR PERSONAL/BUSINESS REFERENCES _____ TEL NO _____

INDIVIDUAL'S YEARLY MEMBERSHIP FEE: \$250.00

APPLICANT'S COMMENTS _____

PLEASE GIVE A LIST OF AGENDA ITEMS THAT YOU WOULD LIKE TO SEE PACNY ADDRESS.

AN INDIVIDUAL MEMBER SHALL HAVE THE RIGHT TO ATTEND REGULAR MONTHLY MEETINGS, WITHOUT VOTE, AND TO RECEIVE ALL INFORMATION DISSEMINATED TO MEMBERS, BUT SHALL BE OBLIGED TO PAY FOR ANY SPECIAL MEETINGS. AN INDIVIDUAL MEMBER SHALL NOT BE ELIGIBLE TO SERVE ON THE BOARD OF DIRECTORS OR BECOME AN OFFICER OF THE BOARD.

SIGNATURE: BY SIGNING THIS APPLICATION, THE APPLICANT DOES HEREBY AGREE TO ABIDE BY PACNY BYLAWS AND ANY OTHER RULES AND REGULATIONS ADOPTED THERETO.

(Print Name) BEING DULY SWORN DEPOSES AND SAYS THAT THE INFORMATION PROVIDED HEREIN IS TRUE AND SUFFICIENTLY COMPLETE SO AS NOT TO BE MISLEADING.

APPLICANT'S SIGNATURE _____ DATE _____

Please make your check payable to: **PACNY**

Mail your application with check to:

Shirley M. Ward, PACNY Administrator
c/o Ardsley Consulting Services, Inc.
Post Office Box 566
Dewitt, NY 13214-0566
Tel: (315) 682-2045 Fax: (315) 682-1826

OFFICIAL USE ONLY

(Individual's Name) HAS BEEN ACCEPTED _____ REJECTED _____ DATE _____

EXPLANATION/COMMENTS _____

MEMBERSHIP COMMITTEE VOTING RESULTS YES _____ NO _____

BOARD OF DIRECTORS APPROVED FOR MEMBERSHIP YES _____ NO _____

(Signature) _____ (Date) _____ (Witness) _____ (Date) _____