THE CITY OF NEW YORK
BUSINESS INTEGRITY COMMISSION
100 CHURCH STREET, 20TH FLOOR
NEW YORK, NEW YORK 10007

EMPLOYEE/AGENT DISCLOSURE FORM FOR A TRADE WASTE BUSINESS

----------OFFICE USE ONLY----------

APPLICATION #: _____ **DATE RECEIVED: _____**

RECEIVED BY: _____

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*1. Name of the employee applicant (first, middle, and last), include maiden name where applicable:

_____

*2. List all aliases, nicknames, maiden name, or any other name(s) or name changes, legal or otherwise.

_____

_____

_____

*3. Home Address: _____

_____

*4. Date of Birth: _____ *5. Social Security Number: _____

*6. Home telephone number(s): _____ *7. Cellular Number: _____

8. Pager No. _____ 9. Home Fax No. _____

*10. E-mail Address:_____

11. Name of the trade waste removal business that the employee/agent is or will work for:

_____

*** (Asterisk) denotes material information on the application. Any material change in the information shall be reported to the Business Integrity Commission, in a notarized writing, within ten (10) calendar days thereof.**

Tax ID or SSN: _____

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12. Position with the trade waste business:

_____

Since (date)

13. **MARITAL INFORMATION**

Single ____ Married ____ Separated ____ Divorced ____ Widowed ____

A. Current Marriage

Date of Marriage: _____ Place of Marriage: _____
(City, County, State)

Spouse's Full Name (First, Middle, Last, including Maiden Name):

_____

Spouse's Date of Birth: _____ Spouse's Social Security Number: _____

Spouse's Home Address (if different): _____

_____

Spouse's Home Telephone No: _____ Work Telephone No.: _____

B. Previous Marriages

If you have ever been legally separated, divorced, or had a marriage annulled, indicate below.

Full Name of Former Spouse	**Date of Birth of Former Spouse**	**Date of Marriage**	**Date of Annulment, Separation, or Divorce**	**Present Address of Former Spouse**

14. **RESIDENCES**. List all residences, including vacation homes, that you have had for the last five (5) years.

Dates (From MM/YR to MM/YR)	**Address**	**Own or Rent**	**Name, Address, & Telephone Number of Landlord or Mortgage Holder**

Tax ID or SSN: _____

15. **EMPLOYMENT.** Beginning with your current employment, list your complete work history.

Dates (From MM/YR to MM/YR)	**Name, Address & Telephone Number of Employer**	**Title or Position Held and Brief Description of Duties**	**Name of Supervisor**	**Reason for Leaving**

*16. Currently, or at any point during the past ten (10 years), have you been a principal or held any equity interest in any business concern that collects, transfers, treats, stores, recycles, processes or disposes of (a) trade waste, as defined in Appendix A and/or (b) hazardous waste as defined in section 27-0901 of the New York State Environmental Conservation Law? Include any and all such business concerns, including transfer stations, located in any state, territory or district of the United States, but do not include stock ownership in publicly traded corporations unless it amounts to more than 5% of said corporation.

_____ Yes _____ No

OTHER TRADE WASTE INTERESTS

	OTHER TRADE WASTE BUSINESS #1	**OTHER TRADE WASTE BUSINESS #2**	**OTHER TRADE WASTE BUSINESS #3**	**OTHER TRADE WASTE BUSINESS #4**
NAME				
ADDRESS				
TELEPHONE NUMBER				
TYPE OF EQUITY OR OTHER INTEREST (IF "OTHER," EXPLAIN THE TYPE OF INTEREST				
PERIOD EQUITY HELD				
% OF TOTAL EQUITY HELD				

*17. Currently, or at any point during the past ten (10) years, have you been a principal or held an equity interest in any non-Trade Waste business (whether currently active or not)? Do not include stock ownership in publicly traded companies.

_____ Yes _____ No

NON-TRADE WASTE BUSINESSES OR INTERESTS

	NON-TRADE WASTE BUSINESS #1	NON-TRADE WASTE BUSINESS #2	NON-TRADE WASTE BUSINESS #3	NON-TRADE WASTE BUSINESS #4
NAME				
ADDRESS				
TELEPHONE NUMBER				
TYPE OF EQUITY OR OTHER INTEREST (IF "OTHER," EXPLAIN THE TYPE OF INTEREST				
PERIOD EQUITY HELD				
% OF TOTAL EQUITY HELD				

*18. Have you ever applied to a governmental agency for any license, registration, permit, or certificate requiring approval by the agency?
_____ Yes _____ No

If "Yes," provide the following information.

Type of License, Registration, Permit, or Certificate Applied and Date Applied	**Name of Agency**	**Disposition of Application (Approved, Denied, Revoked, Suspended)**	**Status (Current, Expired, Revoked, Suspended)**

*19. Do(es) your spouse, child(ren), grandchild(ren), or parent(s) have any ownership interest or financial investment in any waste related business including, but not limited to, transfer stations, landfills, recycling ventures, and carting companies?
_____ Yes _____ No

If "Yes," provide the following information.

Name of Person	**Name and Address of Business**	**Nature and Amount of Investment or Interest**	**Percentage ownership in the business**	**Date of ownership**

CRIMINAL, ADMINISTRATIVE AND INVESTIGATIVE HISTORY

20. During the past ten (10) years, have you ever been convicted of any misdemeanor or felony in any jurisdiction?
_____ Yes _____ No

If "Yes," provide the details below.

Date of Arrest	Date of Conviction	Indictment or Index No.	Charges and Sentence	Court and Jurisdiction

*21. Are there any misdemeanor or felony charges pending against you in any jurisdiction?
_____ Yes _____ No

If "Yes," provide the details below.

Date of Arrest	Indictment or Index No.	Charges	Status	Court and Jurisdiction

*22. a. During the past ten (10) years, have you been found in violation of the administrative rules or regulations of any municipal, state or federal agency where the violation resulted in suspension or revocation of any license, permit or registration or the imposition of a fine of $5,000 or more or an injunction of six months or more?
_____ Yes _____ No

b. During the past ten (10) years, has the applicant business been found in violation of the administrative rules or regulations of any municipal, state or federal agency where the violation resulted in suspension or revocation of any license, permit or registration or the imposition of a fine of $5,000 or more or an injunction of six months or more?
_____ Yes _____ No

c. Are there any administrative charges by any municipal, state or federal agency pending against you or the applicant business where you or the applicant business face the possible sanction of suspension or revocation of any license, permit or registration or the imposition of a fine of $5,000 or more or an injunction of six months or more could be imposed?
_____ Yes _____ No

If "yes" to any of the questions in 22 (a) – (c), provide the requested information below.

Agency or Court	**Docket or Index No.**	**Nature of the Investigation or Charges**	**Status or Outcome**

23. During the past ten (10) years, have you ever been:

a. been the subject, party, or target of any criminal or civil investigation by a federal, state or local prosecutorial agency, investigative agency, regulatory agency, or committee?
_____ Yes _____ No

b. been charged with any misdemeanor or felony criminal offices in any jurisdiction?
_____ Yes _____ No

c. received a subpoena or been asked to testify before any court, grand jury, or legislative, civil, criminal or administrative body?
_____ Yes _____ No

d. received a subpoena requiring the production of documents in connection with a federal, state or local investigation?
_____ Yes _____ No

e. been cited for contempt of any court, grand jury, or legislative, civil, criminal or administrative body?
_____ Yes _____ No

g. entered a plea of nolo contendere to any felony or misdemeanor charge?
_____ Yes _____ No

h. entered into a judicial consent decree, administrative order on consent or similar agreement, or been the subject of a default decree, receivership or any form of independent monitoring?
_____ Yes _____ No

i. been subject to an injunction in any judicial action or proceeding ?
_____ Yes _____ No

j. been granted immunity from prosecution for any conduct constituting a crime under state for federal law?
_____ Yes _____ No

k. had judgment entered against you as a result of a civil action related to the conduct of a business that removes or recycles trade waste, a trade waste broker business or the operation of a dump, landfill or transfer station?
_____ Yes _____ No

If you answered "yes" to any of the questions 23(a)-(k) above, provide the following details.

Name and Address of Court or Agency	**Nature of Investigation or Action**	**Was Testimony Given? If yes, give date testimony was given**	**Date of Investigation and/or Date Charges Were Brought**	**Status or Outcome**

24. Have you ever engaged in, or under your supervision, knowingly permitted to occur any of the following:

a. filed with a government agency or submitted to a government employee, in any jurisdiction, any document which you knew contained a false statement or false information?
_____ Yes _____ No

b. falsified the records of any business or enterprise of any kind?
_____ Yes _____ No

c. given, or offered to give, money or any other benefit to a labor official with intent to influence that labor official with respect to any of his or her official acts, duties or decisions as a labor official?
_____ Yes _____ No

d. given any money or thing of value to a labor union or labor official or representative that was not expressly permitted by section (c) of the Taft-Hartley Act, 29 U.S.C. Section 186?
_____ Yes _____ No

e. given, or offered to give, money or any other benefit to a public servant with intent to influence that public servant with respect to any of his or her official acts, duties or decisions?
_____ Yes _____ No

f. given, or offered to give, money or other benefit to an official or employee of a private business with intent to induce that official or employee to engage in illegal business practices?
_____ Yes _____ No

If you answered "yes" to any of the questions 24(a)-(f) above, provide the following details.

Name of the Union, Agency, or Person Involved	**Name of the Union or Public Official Involved**	**Date of Occurrence**	**Amount of Money/Document Involved**	**Reason for Engaging in the Practice**

25. Have you ever been subject to any investigation by a municipal, state or federal agency of any alleged violation of civil law involving racketeering or the potential forfeiture of any asset?
_____ Yes _____ No

If you answered "Yes," provide the following details.

Agency or Court	**Nature of Investigation or Charges**	**Indictment, Docket, or Index No.**	**Status**

*26. Have you ever applied for any pistol or firearm permit, firearm dealer's license, or permit to carry a pistol or firearm in any jurisdiction?
_____ Yes _____ No

If you answered "yes," provide the following details.

Date of Application	**Type of Application**	**Place Filed and Issuing Agency or Department**	**Type of Firearm**	**Reason for Application**	**Disposition (If Granted, provide Number**	**Reason for Denial (if applicable)**	**Status of Permit**

*27. Do you possess or own any firearm?
_____ Yes _____ No

If you answered "Yes," provide the following details.

Type of Firearm	Owned Since	Serial Number

*28. Do you know or have you ever knowingly been associated with, socially or professionally, any person known by you to be convicted of a felony or having ties with organized crime?

_____ Yes _____ No

If "yes," explain:

_____

_____

_____

_____

_____

29. Have you ever agreed with another trade waste business not to compete in the conduct and the providing of trade waste removal service?
_____ Yes _____ No

If "yes," explain below:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

30. Have you ever agreed with another trade waste business to divide or allocate customers to or respect an existing division of allocation of customers by geography, territory or otherwise?
_____ Yes _____ No

If "yes," explain below:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

31. Have you ever discussed with anther private carter the prices to be submitted on a trade waste contract bid?
_____ Yes _____ No

If "yes," explain below:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

FINANCIAL INFORMATION

32. **Real Property.** List below each direct or indirect interest in real property currently held by you and/or your spouse. If none, state "none."

Address	Person or Entity From Whom Acquired	Co-Owners & Addresses	Approximate Purchase or Rental Cost	Approximate Current Value

33. **Loans Owed to Principal.** List below all outstanding loans made or outstanding notes held by you or your spouse in excess of $5,000. (This refers to monies that are owed to you or your spouse.) If none, state "none."

Name and Address of Debtor	Original Amount & Date of Loan	Terms of Loan & Security, if any	Approximate Balance Outstanding

34. **Loans Owed By the Principal.** List each creditor to whom either you or your spouse are indebted, including but not limited to loans, lines of credit, mortgages on real property, co-op loans, secured or unsecured debts or obligations made, guaranteed or co-signed by either you or your spouse, in an amount of $5,000 or more. If none, state "none."

Name and Address of Creditor	**Account No.**	**Amount of Indebtedness**	**Maturity Date**	**Terms of Repayment**	**Name and Telephone No. of Loan Officer**

35. Identify all persons or entities from whom you or your spouse has received gifts valued at $1,000 or more during the past three (3) years. If none, state "none."

Source of Gift, Including Name and Address	**Recipient**	**Relationship of Source of Gift to Applicant**	**Nature and Amount of Gift**	**Date of Gift**

36. List all persons or entities to whom/which you or your spouse have given gifts valued at $1,000 or more during the past three (3) years. If none, state "none."

Recipient	**Identify Principal Who Gave Gift, If Applicant Business, So State**	**Relationship of Recipient to Applicant Business or Principal**	**Nature and Amount of Gift**	**Date of Gift**

37. Have you filed all required tax returns by the due date or within a properly obtained extension period for each of the past 3 years?
_____ Yes _____ No

If "no," provide the following information:

a. The year(s) in which you did not file by the due date or a properly obtained extension, the type of return involved, and whether the delayed filing relates to Federal, State or Local tax returns.

_____

_____

_____

b. Your address during the year(s) in question.

_____

c. The date(s) when you filed the late return(s).

_____

d. The reason(s) for the late or non-filing.

_____

_____

_____

e. The amount, if any, of penalty assessed for the year(s) in question.

_____

38. Have you paid all federal, state and local income and business taxes for which you were liable for the three (3) years preceding the date this application is submitted?

If "no," explain why not. **(If you are contesting such taxes in a pending judicial or administrative proceeding, please attach the relevant documentation.)**

_____

_____

_____

39. **Tax Liens.** List below any tax liens entered against you or your spouse by any tax authority. If none, state "none."

Name of Tax Lien Debtor	**Name of Tax Authority**	**Original Amount of Tax Lien**	**Date Lien Entered & Docket No.**	**Amount Outstanding**

40. List below any monies currently owed by you or your spouse to tax authorities. Indicate the status of the matter (i.e., the date by which you will make payment, whether the tax authorities have instituted proceedings against you, etc.). If none, state "none."

Name	**Name of Tax Authority**	**Date**	**Amount**	**Status**

41. Have you ever been refused a bond or surety?

_____ Yes _____ No

If yes, provide the information requested below.

Agency	**Date**	**Reason**

CERTIFICATION

This certification must be completed before a notary public by the Employee or Agent. Certifications must be notarized when signed.

ANY MATERIAL FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS APPLICATION IS SUFFICIENT CAUSE FOR DENIAL. IN ADDITION, SUCH FALSE SUBMISSION MAY SUBJECT THE PERSON AND/OR ENTITY MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

I, _____, being duly sworn, state: that I am
(Full Name)

_____ of _____; and
(Title/Position) (Applicant Business)

I have read and understood the questions contained in the attached application and its attachments, which consists of _____ pages; and to the best of my knowledge the information given in response to each question and in the attachment is full, complete and truthful; that the New York City Business Integrity Commission and the New York City Department of Investigation may, by any means they or each of them deem appropriate, determine the accuracy and truth of the statements made in this application; and that all the information submitted is for the express purpose of determining whether the applicant meets the licensing standards set forth in Local Law 42 of 1996 of the City of New York.

_____
(Signature of Employee or Agent)

Sworn to before me

this _____ day of _____, 20_____

_____
Notary Public

4/06

Tax ID or SSN: _____

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RELEASE AUTHORIZATION FOR EMPLOYEE/AGENT

I,_____, am the_____and an employee
(Print Name) (Title/Position)

or agent of _____(the "Applicant Business").

I am over the age of 21.

I have authorized the New York City Business Integrity Commission ("Commission") to conduct an investigation into my background for the purpose of determining whether the applicant meets the licensing standards set forth in Local Law 42 of 1996 of the City of New York.

I hereby authorize any and all of the entities and individuals described below to release to the Commission any and all information, documentary or otherwise, pertaining to the applicant and/or its principals, affiliates, agents and employees as may be requested by the Commission. Any such information may be requested by and released to any employee, agent or representative of the Commission.

I hereby authorize the release of any such information by any federal, state, local, or foreign government or agency, any private organization or entity, and/or any individual in his or her personal or professional capacity. These entities and individuals include, but are not limited to, accountants, attorneys, banks, bookkeepers, common carriers, courts, credit reporting companies, data systems management companies, educational institutions, employee benefits managers, employees of the applicant, employers of the applicant's principal(s), financial institutions, internet service providers, investigative firms, investment firms, labor unions, law enforcement agencies, media companies, motor vehicle departments, pension funds, probation departments, selective service boards, taxing authorities, telecommunications companies and utilities.

This release shall apply to any such entities and individuals wherever they may be located, within or without the City of New York, State of New York, or United States of America. They may convey information in whatever form and by whatever means requested by the Commission, whether by telephone, fax, mail, computer media or by any other means.

This release authorization is effective for a period of five years as of the date set forth below. A photocopy or fax of this authorization will be construed as valid as though it were the original.

In connection with the release of information pursuant to this authorization, I hereby waive the benefit of any confidentiality agreement and of any privileges pertaining to confidentiality and any rights to privacy that may be accorded by federal, state or local law.

NOTICE TO ENTITIES AND INDIVIDUALS RELEASING INFORMATION: I hereby waive any right to be notified when an entity or individual releases information pursuant to this authorization and hereby authorizes the Commission to direct any such entity or individual not to provide such notification

Sworn to before me _____
(Signature of Employee/Agent)

This _____ day of _____, 20 ____

_____
Notary Public

4/06

Tax ID or SSN: _____ 20

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