



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

**TRADE ASSOCIATION  
REGISTRATION APPLICATION**

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

APPLICATION #: \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_

\*1. Name of the applicant trade association:

\_\_\_\_\_

\*2. Main Office: \_\_\_\_\_

\*3. Mailing Address: \_\_\_\_\_

\*4. Business telephone number(s): \_\_\_\_\_ Fax Number: \_\_\_\_\_

\*5. E-Mail Address: \_\_\_\_\_ Website, if any: \_\_\_\_\_

\*6. Agent for Service of Process in **New York City**. State the name, address, and telephone number of the person of suitable age and discretion who shall be designated as Applicant's agency for service of process in New York City.

Name: \_\_\_\_\_

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

Telephone No.: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**7. Attach to this application a copy of the applicant trade association's By-Laws and Rules as well as a copy of any association certificate filing with governmental agencies such as the Secretary of State or County Clerk.**

\* (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 thirty (30) calendar days thereof.

Tax ID or SSN: \_\_\_\_\_

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\*8. Does the applicant trade association share office space, staff or equipment (including but not limited to telephone lines) with any other business or organization?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If "Yes," provide details below:

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\*9. On Schedule A below, identify all current officers, including Board members. For each individual, provide the following information.

**SCHEDULE A – CURRENT OFFICERS OF THE APPLICANT**

	Current Officer #1	Current Officer #2
Name (first, middle and last) Also include maiden name where applicable		
Home Address (es)		
Home Telephone Number		
Cellular Number		
E-mail Address		
Date of Birth		
Social Security Number		
Employer's Name, Address and Telephone Number		
Position in Trade Association		
From (date) to (date)		

Tax ID or SSN: \_\_\_\_\_

9. Cont. **SCHEDULE A – CURRENT OFFICERS OF THE APPLICANT**

	Current Officer #3	Current Officer #4
Name (first, middle and last) Also include maiden name where applicable		
Home Address (es)		
Home Telephone Number		
Cellular Number		
E-mail Address		
Date of Birth		
Social Security Number		
Employer's Name, Address and Telephone Number		
Position in Trade Association		
From (date) to (date)		

9. Cont. **SCHEDULE A – CURRENT OFFICERS OF THE APPLICANT**

	Current Officer #5	Current Officer #6
Name (first, middle and last) Also include maiden name where applicable		
Home Address (es)		
Home Telephone Number		
Cellular Number		
E-mail Address		
Date of Birth		
Social Security Number		
Employer's Name, Address and Telephone Number		
Position in Trade Association		
From (date) to (date)		

Tax ID or SSN: \_\_\_\_\_

10. On Schedule B below, identify all individuals who had been officers, including past Board members, of the applicant trade association at any point during the past ten (10) years. For each individual, provide the following information.

**SCHEDULE B – PAST OFFICERS OF THE APPLICANT**

	Past Officer #1	Past Officer #2
Name (first, middle and last) Also include maiden name where Applicable		
Home Address (es)		
Home Telephone Number		
Cellular Number		
E-mail Address		
Date of Birth		
Social Security Number		
Business Name and Address		
Position Held		
From (date) to (date)		
Reason for Leaving		

10. Cont. **SCHEDULE B – PAST OFFICERS OF THE APPLICANT**

	Past Officer #3	Past Officer #4
Name (first, middle and last) Also include maiden name where Applicable		
Home Address (es)		
Home Telephone Number		
Cellular Number		
E-mail Address		
Date of Birth		
Social Security Number		
Business Name and Address		
Position Held		
From (date) to (date)		
Reason for Leaving		

11. How many individuals does the applicant trade association currently employ? \_\_\_\_\_

\*12. On Schedule C below, identify the current employees of the applicant trade association and provide the following information.

**SCHEDULE C – LIST OF EMPLOYEES**

	Employee #1	Employee #2
Name (first, middle and last) Also include maiden name where Applicable		
Home Address (es)		
Home Telephone Number		
Cellular Number		
E-mail Address		
Date of Birth		
Social Security Number		
Title or Position and Brief Description of Duties		
Hours Worked Per Week		
Employment Start Date		
Salary		
Does employee or any of his or her relatives any ownership or control over any businesses operating in the public wholesale market? If so, identify the business.		

Tax ID or SSN: \_\_\_\_\_

12. Cont. **SCHEDULE C – LIST OF EMPLOYEES**

	Employee #3	Employee #4
Name (first, middle and last) Also include maiden name where Applicable		
Home Address (es)		
Home Telephone Number		
Cellular Number		
E-mail Address		
Date of Birth		
Social Security Number		
Title or Position and Brief Description of Duties		
Hours Worked Per Week		
Employment Start Date		
Salary		
Does employee or any of his or her relatives any ownership or control over any businesses operating in the public wholesale market? If so, identify the business.		





14. During the past five (5) years, has the applicant trade association or any past officer, including past Board member, been convicted of any misdemeanor or felony in any jurisdiction?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If "Yes," provide the details below.

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

\*15. Are there any misdemeanor or felony charges pending against the applicant trade association or any past officer, including past Board member, in any jurisdiction?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If "Yes," provide the details below.

Name	Date of Arrest	Indictment No.	Charge	Status	Court and Jurisdiction

\*16. Are there any civil actions pending against the applicant trade association or any past officer, including Board member, in any jurisdiction?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No

If "Yes," provide the details below.

Name of Trade Association	Docket or Case No. and Date	Charge	Status	Court and Jurisdiction

17. During the past five (5) years, has the applicant or any past officer, including past Board member, 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. received a subpoena or been asked to testify before any court, grand jury, or legislative, civil, criminal or administrative body?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No

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

If you answered "Yes" to any of the questions 18(a)-(c) above, provide the following details.

Name	Name and Address of Court or Agency	Nature of Proceedings or Investigation	Name and Position of Person Who Provided Testimony	Date on Which Testimony was Given	Date of Investigation

Tax ID or SSN: \_\_\_\_\_

18. During the past five (5) years has the applicant or any past officer, including past Board member:

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

b. entered a plea of nolo contendere, judicial consent decree, administrative order on consent or similar agreement, or been the subject of a default decree?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No

c. been subject to an injunction in any judicial action or proceeding ?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No

d. been granted immunity from prosecution for any conduct constituting a crime under state for federal law?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No

e. refused to testify or answer any question in any criminal, civil or administrative proceeding?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No

f. been the subject of administrative charges for which the potential sanction was suspension or revocation of a license, permit or registration or a fine, penalty or settlement of \$5,000 or more?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No

If you answered "Yes" to any of the questions 19(a)-(f) above, provide the following details.

Name	Name and Address of Court or Agency	Nature of Proceedings or Investigation	Name and Position of Person Who Provided Testimony	Date on Which Testimony was Given	Date of Investigation or Consent Decree

\*19. Has the applicant trade association or any past officer, including past Board member, 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 public servant with intent to influence that public servant with respect to any of his or her official acts, duties or decisions?

\_\_\_\_\_ Yes \_\_\_\_\_ No

d. 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 unethical or illegal business practices?

\_\_\_\_\_ Yes \_\_\_\_\_ No

e. 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

f. 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

If you answered "Yes" to any of the questions 20(a)-(f) above, provide the following details.

Name of Labor Union or Organization	Name of the Agency Involved	Name of the Public Official Involved	Date of Occurrence	Amount of Money Involved	Document Involved

\*20. Has the applicant trade association or any past officer, including past Board member, 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.

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

\*21. During the past ten (10) years, has the applicant trade association or any past officer, including past Board member, been subject to the appointment of an independent auditor, monitor, receiver or trustee?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If "Yes," provide the information below.

Name	Name and Address of Auditor, Monitor, Receiver or Trustee	Nature of Audit, Monitorship, Receivership or Trusteeship	Dates of Audit, Monitorship, Receivership or Trusteeship

**CERTIFICATION**

**This certification must be completed by the applicant and all of its current officers before a notary public.**

**ANY MATERIAL FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS APPLICATION IS SUFFICIENT CAUSE FOR DENIAL OR REVOCATION OF A TRADE ASSOCIATION REGISTRATION, THEREBY PRECLUDING THE APPLICANT FROM OPERATING AS A TRADE ASSOCIATION IN THE CITY'S PUBLIC WHOLESALE MARKETS. 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 Name)

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 inducing the Business Integrity Commission to issue the applicant a trade association registration to operate in the City's public wholesale markets.

\_\_\_\_\_  
(Signature of Applicant)

By: \_\_\_\_\_  
(If corporation or partnership, state title)

Sworn to before me

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public

Tax ID or SSN: \_\_\_\_\_

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**RELEASE AUTHORIZATION FOR APPLICANT**

I, \_\_\_\_\_, am the \_\_\_\_\_ and a principal of \_\_\_\_\_  
(Print Name) (Title/Position)  
\_\_\_\_\_ (the "Applicant"); I am over the  
age of 21 and I have the authority to execute this release on behalf of the applicant.

The applicant has authorized the New York City Business Integrity Commission ("Commission") to conduct an investigation into its background and the background of its principals, affiliates, agents and employees for the purpose of determining whether the applicant meets the registration standards set forth in Local Law 28 of 1997 and Local Law 50 of 1997 of the City of New York.

The applicant hereby authorizes 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.

The applicant hereby authorizes 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, the applicant hereby waives 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.

The applicant, in addition, hereby waives all liability as to the City of New York, the Commission, and its instrumentalities and agents for any and all damages that might arise in connection with the investigation of the applicant or from the release of any information resulting from such investigation, other than a willful, unlawful disclosure or publication.

**NOTICE TO ENTITIES AND INDIVIDUALS RELEASING INFORMATION:** The applicant hereby waives 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 Applicant)

This \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

By: \_\_\_\_\_  
(If corporation or partnership, state title)

\_\_\_\_\_  
Notary Public