

The City of New York BUSINESS INTEGRITY COMMISSION

100 Church Street · 20th Floor New York · New York 10007 Tel. (212) 437-0500 · Fax (646) 500-7096 www.nyc.gov/bic

INSTRUCTIONS

LABOR UNION OR LABOR ORGANIZATION REGISTRATION APPLICATION

PLEASE READ THESE INSTRUCTIONS AND ALL QUESTIONS CAREFULLY AS THE APPLICATION HAS RECENTLY BEEN REVISED

Definitions of terms used in the application are set forth in Title 22, Chapters 1-A and 1-B of the Administrative Code of the City of New York ("Code") and in Title 17, Chapter 2 of the Rules of the City of New York. Before completing this application, the applicant and all others required to execute documents hereunder should read and familiarize themselves with Title 22 of the Code and the related rules. These instructions are not a substitute for such a complete review and may not be relied on in lieu of the law and rules. Copies of applicable statutes and rules are available at the office of the New York City Business Integrity Commission ("Commission").

Attached is the application for a labor union or labor organization registration. If a question is not applicable, write "not applicable" or "N.A." An application that has not been completed properly may be denied as incomplete and/or on the basis of the Commission's investigation and review of the incomplete application, or the application may be returned to the applicant without being processed. An application returned as incomplete will not be deemed submitted.

DOCUMENTS TO BE SUBMITTED

A number of documents must be submitted to the Commission in order for the application to be considered. The applicant must submit the following documents (to the extent applicable), some of which are described in these instructions, some in the body of the application and attachments, and some in the applicable rules. Examples of some of the required documents include but are not limited to the following:

- Labor Union or Labor Organization Registration Application
- Notarized Certification (signed by an officer)
- Documents relating to any forfeiture, receivership, or independent monitoring
- Officer Registration Disclosure Form (for each officer of the labor union or labor organization)
- Payment by credit card,¹ money orders, or checks made payable to the "New York City
 Business Integrity Commission" to cover the following fees:

\$4000 – Labor Union Registration application fee

\$600 – for each Officer Registration Disclosure Form

ALL FEES NON-REFUNDABLE

THE APPLICANT MUST SUBMIT AN ORIGINAL AND ONE (1) COPY OF THE APPLICATION AND ALL DOCUMENTS.

NOTE: REQUEST(S) TO WITHDRAW AN APPLICATION WILL BE EVALUATED ON A CASE BY CASE BASIS AND WILL NOT NECESSARILY BE APPROVED.

¹ Effective Monday, October 15, 2018, due to City-wide policy, all credit card and debit card transactions will be charged a fee of 2% of the payment amount.

LABOR UNION OR LABOR ORGANIZATION REGISTRATION APPLICATION

Each page submitted by the applicant must contain in the lower left hand corner the applicant's social security or tax identification number and each page must be numbered sequentially as "Page __ of __ Pages" (*i.e.*, if a twenty-five (25) page application were submitted, the first page would be marked: "Page 1 of 25 Pages").

Applicant requiring additional space to complete any answer may attach additional pages to the application. Indicate on the top of each such additional page, the Part and question number to which the additional page relates. The Schedules in the application also may be copied if additional schedule pages are needed. All additional pages and Schedules also must be identified in the lower left-hand corner with the applicant's social security or tax identification number. Each added page must be numbered sequentially like the rest of the application (*i.e.*, "Page _ of Pages").

The applicant is under a continuing obligation to update answers to all application questions. Any change in the answer to such a question must be provided to the Commission in notarized writing, as specifically set forth in Title 22, Chapters 1-A and 1-B of the Code and the rules promulgated thereunder. Applicants who represent employees located within a Seafood Distribution Area must notify the Commission within ten (10) business days of the change. Applicants who represent employees located within a Public Wholesale Market that is not within a Seafood Distribution Area must notify the Commission within thirty (30) calendar days of the change. The applicant's continuing obligation begins upon submission of the registration application and extends throughout the processing period and any registration term.

NOTARIZED CERTIFICATIONS

Upon completion of the application and all of its attachments, a notarized certification form must be executed. Officers of the applicant business must separately provide the Officer Registration Disclosures as noted below.

OFFICER REGISTRATION DISCLOSURES

Each officer must complete an officer information form and the notarized certification attached to the Officer Registration Disclosure Form (in addition to the notarized certification for the license application itself).

THE COMMISSION WILL NOTIFY THE APPLICANT WHEN THE APPLICATION IS APPROVED AND WILL SCHEDULE AN APPOINTMENT FOR AN OFFICER OF THE APPLICANT TO APPEAR AT THE OFFICES OF THE COMMISSION TO SIGN A REGISTRATION ORDER.

All applications may be submitted in person or mailed to:

NYC Business Integrity Commission 100 Church Street, 20th Floor New York, 10007

If you have any questions about this application, please call 212-437-0555.



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LABOR UNION/LABOR ORGANIZATION REGISTRATION APPLICATION

	OFFICE USE ONLY
APPLICATION #:	DATE RECEIVED:
	RECEIVED BY:
	ons on this application is material information.
	within a Seafood Distribution Area, any change in this Integrity Commission in a notarized writing within ten (10) es of the City of New York § 14-13(c).
Distribution Area, any change in this informat	within a Public Wholesale Market that is not within a Seafood tion shall be reported to the Business Integrity Commission in a lays of the change. <i>See</i> Title 17, Rules of the City of New York
1. Name of the applicant labor union or labor org	ganization or local number:
2. Main Office:	
3. Mailing Address:	
4. Business Telephone Number(s):	5. Fax Number:
6. Applicant's Primary E-mail Address:	7. Website, if any:
8. Affiliated national or international union's business	iness name, address, and telephone number:
Name:	
Address:	
Telephone Number:	E-Mail Address:
	copy of the applicant labor union or labor S. Department of Labor for the past three (3) years.
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Provide Agent information: Name (First, Middle, Last)	
Address	
Telephone Number	
E-mail Address	
Yes No If "Yes," how many	Market (Hunts Point Produce Market)?

 2

EIN: _____

11. On Schedule A below, identify all current officers and anyone who has been an officer at any point during the past five (5) years. For each individual, provide the following information. If needed, copy and attach additional Schedule A form(s).

Officer #2

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SCHEDULE A – CURRENT AND PAST OFFICERS OF THE APPLICANT

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Officer #1

Officer #3	Officer #4
	Officer #3

12. On Schedule B below, identify all current business agent of the labor union or labor organization or anyone who has been a business agent at any point during the past five (5) years. For each individual, provide the following information. If needed, copy and attach additional Schedule B form(s).

Business Agent #1	Business Agent #2
	Business Agent #1

	Business Agent #3	Business Agent #4
Name (First, Middle, and Last;		-
include maiden name)		
Home Address(es)		
D: TILL N		
Primary Telephone Number		
(Home/Cell/Work)		
E-mail Address(es)		
Date of Birth		
Social Security Number		
Business Name, Address and		
Telephone Number		
Position or Title		
From (date) to (date)		

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13. On Schedule C below, identify all individuals who are or have been members of the Executive Board of the applicant labor union or labor organization at any point during the past five (5) years. For individuals who have been previously identified on this application, you need only fill in the person's name, position, and applicable dates. If needed, copy and attach additional Schedule C form(s).

SCHEDULE C – CURRENT AND PAST EXECUTIVE BOARD MEMBERS

	Executive Board Member #1	Executive Board Member #2
Name (First, Middle, and Last;		
include maiden name)		
Home Address(es)		
Primary Telephone Number		
(Home/Cell/Work)		
E-mail Address(es)		
Date of Birth		
Social Security Number		
Business Name and Address		
Position Held in Labor Union		
From (date) to (date)		
From (date) to (date)		
From (date) to (date)	Executive Board Member #3	Executive Board Member #4
Name (First, Middle, and Last;	Executive Board Member #3	Executive Board Member #4
Name (First, Middle, and Last; include maiden name)	Executive Board Member #3	Executive Board Member #4
Name (First, Middle, and Last;	Executive Board Member #3	Executive Board Member #4
Name (First, Middle, and Last; include maiden name)	Executive Board Member #3	Executive Board Member #4
Name (First, Middle, and Last; include maiden name) Home Address(es) Primary Telephone Number (Home/Cell/Work)	Executive Board Member #3	Executive Board Member #4
Name (First, Middle, and Last; include maiden name) Home Address(es) Primary Telephone Number	Executive Board Member #3	Executive Board Member #4
Name (First, Middle, and Last; include maiden name) Home Address(es) Primary Telephone Number (Home/Cell/Work)	Executive Board Member #3	Executive Board Member #4
Name (First, Middle, and Last; include maiden name) Home Address(es) Primary Telephone Number (Home/Cell/Work) E-mail Address(es)	Executive Board Member #3	Executive Board Member #4
Name (First, Middle, and Last; include maiden name) Home Address(es) Primary Telephone Number (Home/Cell/Work) E-mail Address(es) Date of Birth	Executive Board Member #3	Executive Board Member #4
Name (First, Middle, and Last; include maiden name) Home Address(es) Primary Telephone Number (Home/Cell/Work) E-mail Address(es) Date of Birth Social Security Number	Executive Board Member #3	Executive Board Member #4

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14. On Schedule D below, identify the current employees of the applicant labor union or labor organization and provide the following information. If needed, copy and attach additional Schedule D form(s).

SCHEDULE D – LIST OF EMPLOYEES

Employee #1

Name (First, Middle, and Last)
Also include maiden name)

	Employee #1	Employee #2	
Name (First, Middle, and Last) Also include maiden name)			
Home Address(es)			
Primary Telephone Number (Home/Cell/Work)			
Date of Birth			
Social Security Number			
Title or Position and Brief Description of Duties			
Full-Time or Part-Time			

15. Has the applicant or any past officer, including past business agents and Executive Board members, ever been convicted of any criminal offense in any jurisdiction?

NOTE: In answering this question, <u>DO NOT</u> include information regarding any criminal action or proceeding against the applicant business, any current principal of the applicant business, or any past principal of the applicant business that was followed by a termination in favor of that person or business pursuant to New York Criminal Procedure Law § 160.50, by a youthful offender adjudication pursuant to New York Criminal Procedure Law § 720.35, by a conviction for a violation sealed pursuant to New York Criminal Procedure Law § 160.55, or by a conviction sealed pursuant to New York Criminal Procedure Law § 160.58 (conditional sealing of certain controlled substance, marihuana, or specified offenses).

Yes	No

If "Yes," provide the following information: (It is not necessary to provide information relating exclusively to traffic violations.)

Applicant or Officer Name	Date of Arrest	Date of Conviction	Indictment, Docket or Index No.	Charge(s) and Sentence	Court and Jurisdiction

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raffic violations.)	e following informat	1	<u> </u>			
Name	Date of Arrest	Indictment No.	Charge	Status		rt and sdiction
risdiction?	earty to or subject of	any criminal, civi	l or regulator	y action, proc	eeding, or inve	estigation, in
risdiction? Ye c. entered i	es No anto any judicial or acces No	Iministrative cons	ent decrees?	•	-	
risdiction? Ye c. entered i	s No	Iministrative cons	above, provid ceedings N P P P	•	-	

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		ing information	_				Status
Name	Agen	cy or Court	Nature of Investigat Charges	Investigation or		Indictment, Docket, or Index No.	
Duning the	most five (5)	voore has the	amplicant lab		lehon onconiget		most officer i
ast business as ceiver, admir YesYes	gent and Execusive and Execusive and Execusive Execution (Figure 1) and	eutive Board moustee?	ember, been s	ubject to the	labor organizate appointment of	an indepe	
ast business as ceiver, admir YesYes	gent and Execusive and Execusive and Execusive Execution (Figure 1) and	eutive Board mustee? ation:	Address of onitor,	Nature of Monitor	of Audit, rship, rship, or	Date Mon Rece	endent auditor,
ast business asceiver, admir YesYes	gent and Execusive and Execusive and Execusive Execution (Figure 1) and	ation: Name and A Auditor, Mo	Address of onitor,	Nature Monitor	of Audit, rship, rship, or	Date Mon Rece	es of Audit, itorship, eivership, or
	gent and Execusive and Execusive and Execusive Execution (Figure 1) and	ation: Name and A Auditor, Mo	Address of onitor,	Nature Monitor	of Audit, rship, rship, or	Date Mon Rece	es of Audit, itorship, eivership, or

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CERTIFICATION

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

ANY MATERIAL FALSE STATEMENT MADE IN CONNECTION WITH THIS APPLICATION MAY SUBJECT THE PERSON AND/OR ENTITY MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

I,			being duly sworn, state: that I am
(Fu	ıll Name)		
	of _		; and
(Title/Position)			(Applicant Name); and
pages; and to attachment is full, comple City Department of Investionand truth of the statements	the best of my knowledge the and truthful; that the New igation may, by any means the made in this application; an integrity Commission to issue	he inf York ney or d that	tached application and its attachments, which consists of formation given in response to each question and in the City Business Integrity Commission and the New York each of them deem appropriate, determine the accuracy all the information submitted is for the express purpose applicant a labor union or labor organization registration
			(Signature of Applicant)
	F	By:	
	L	y.	(state title)
Sworn to before me			
this day of	, 20		

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