

Application for Membership Long Island Liquid Waste Association, Inc.P.O. Box 311, Brightwaters, NY 11718

P.O. Box 311, Brightwaters, NY 11718 (631) 585-0448 www.lilwa.org

info@lilwa.org



Name of Company.	
Name of License Holder:	
Address:	
Office Phone:	Email Address:
Cell Phone:	Opt in to Text Alert Network ?YESNO
Nassau County Consumer Affairs License	#:
Suffolk County Consumer Affairs License #	<u> </u>
Number of Years in Industry	Sponsored by:
Name & Title of Company Representative ((if different than above):
Cell Phone of Representative	Email of Representative
 □ Septic Tank Pumping, Cleaning & Maintenance □ Grease Trap/ Grease Inceptor Clea Maintenance □ Yellow Grease/ Fryer Oil Collection □ Temporary Restroom Facilities □ Waste Line Cleaning & Inspection □ Bulk Liquid Waste Transportation 	Installer
Associate Members (Industry Suppliers and Products or Services: Affiliate Members (Industry Suppliers and Printing & advertising etc.)	and Supporters) \$450.00 ANNUAL DUES (ie. Precast, Pipe, I/As etc.) and Supporters) \$200.00 ANNUAL DUES (ie. Insurance, diesel, truck repair,
	d Waste Association, Inc. and agree to pay the above scheduled dues. The undersigned applicant in id and to better the industry as a whole and agrees to become a member of the Long Island Liquid Waste tions, By-Laws and Constitution of this Association.
Applicant's Signatur	re Date

All applications and applicants are subject to the approval of the Board of Directors. Applicants will be notified of the Board's decision immediately after the Board has met following receipt of application and dues submission. This agreement shall not be cancelled unless written notice is sent to the Association office by Registered or Certified Mail.