

American Council of Engineering Companies of Delaware
Application for Membership

Date: _____

Name of Firm: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Information: Name: _____

Telephone: _____ Fax: _____

Email: _____ Year Established: _____

Total number of personnel in Delaware, including officers, engineers, surveyors, draftsmen, clerks, secretaries, bookkeepers etc.: _____

Business Organization Type:

- | | |
|--|--|
| <input type="checkbox"/> Cooperative | <input type="checkbox"/> Joint Venture |
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Limited Partnership |
| <input type="checkbox"/> Sub Chapter S | <input type="checkbox"/> Limited Liability Company (LLC) |
| <input type="checkbox"/> Public | <input type="checkbox"/> Partnership |
| <input type="checkbox"/> Private | <input type="checkbox"/> Sole Proprietorship |

Minority Status:

- | | |
|--|--|
| <input type="checkbox"/> Certified Small Business | <input type="checkbox"/> Service Disabled Veteran Owned Business |
| <input type="checkbox"/> Disadvantaged Business Enterprise | <input type="checkbox"/> Women's Business Enterprise |
| <input type="checkbox"/> Minority Business Enterprise | |

Disciplines Offered: For statistical purposes, indicate which of the following disciplines are provided by the firm. Include only in-house capability by virtue of experience and having a principal registered in the specific field:

- | | |
|--|---|
| <input type="checkbox"/> Agricultural/Biological Engineering | <input type="checkbox"/> Geotechnical |
| <input type="checkbox"/> Architectural | <input type="checkbox"/> Hydrology |
| <input type="checkbox"/> Chemical | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Civil - General | <input type="checkbox"/> Land |
| <input type="checkbox"/> Civil - Structural | <input type="checkbox"/> Development |
| <input type="checkbox"/> Civil - Transportation | <input type="checkbox"/> Marine & Coastal |
| <input type="checkbox"/> Computer/Communications/Systems | <input type="checkbox"/> Mechanical |
| <input type="checkbox"/> Construction Management | <input type="checkbox"/> Mining/Materials |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Nuclear/Petroleum/Energy |
| <input type="checkbox"/> Environmental | <input type="checkbox"/> Planning |
| <input type="checkbox"/> Fire/Earthquake/Hazards/Safety | <input type="checkbox"/> Surveying/GIS/Mapping |
| <input type="checkbox"/> Forensic | <input type="checkbox"/> Water/Wastewater |
| | <input type="checkbox"/> Other _____ |

Application for Membership

Professional Organizations or technical societies to which the firm or its principles belong:

(Member)

(Society)

(Member)

(Society)

List partners, limited partners or individual owners; for a corporation, list directors and officers in Delaware (two):

<u>Name</u>	<u>Title</u>	<u>Office Location</u>	<u>P.E., P.L.S. or R.A. License Numbers and States</u>
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Give the names and address of two (2) references, preferably members of ACEC-Delaware in private engineering:

1. _____
2. _____

Delaware Assoc. of Professional Engineers (DAPE) Certificate of Authorization No: _____

Please indicate below if you are interested in information regarding the ACEC Trusts.

Business Insurance Trust Retirement Trust Life/Health Trust

What issues are important to you and your company?

I declare that the above information is correct and agree to pay the dues on time.

Signature

Name/Title

Return to: ACEC of Delaware, P.O. Box 1858, Dover, DE 19903-1858
OR: Info@ACECDE.org

Please call Kim Willson, Executive Director, at (302) 270-2705 if you have any questions or need more information.

ACEC

AMERICAN COUNCIL OF ENGINEERING COMPANIES
of Delaware