

**PLUMBING, HEATING AND COOLING CONTRACTORS OF LONG ISLAND, INC.  
2024 APPLICATION FOR MEMBERSHIP**

**2024 ANNUAL DUES FOR FEDERAL, STATE & LOCAL ARE AS FOLLOWS:  
New Member - \$1,295.00 (\$600 Discount Off Full Annual Membership)  
This Fee will Be Applied to Your Dues Upon Acceptance into PHCC.  
Membership Valid From 1/1/2024 thru 12/31/2024**

Applicant's Name \_\_\_\_\_ Company \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Office Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Year Established \_\_\_\_\_ Type of Firm (check one):  Corporation  Partnership  Individual

*If Corporation or Partnership, List Names & Addresses of Principals & Their Titles:*

Name \_\_\_\_\_ License Number # \_\_\_\_\_

Address \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ License Number # \_\_\_\_\_

Address \_\_\_\_\_ Title \_\_\_\_\_

I have been actively engaged in the Plumbing Business as a Master Plumber or Heating, Cooling (HVAC), Supply or Mechanical Contracting Field for the past \_\_\_\_\_ Years.

My Certificate of Competency No. is \_\_\_\_\_ issued by the Examining Board of Plumbers in the City, Village or Town of \_\_\_\_\_ License No. \_\_\_\_\_ Issued \_\_\_\_\_

My Nassau Office of Consumers Affairs No. is \_\_\_\_\_ Issued \_\_\_\_\_

Are you now or have you ever been a member of any Association?  Yes  No

If Yes, please provide the name of the Association and indicate present status of membership:

Association \_\_\_\_\_ Since \_\_\_\_\_ Status  Active  Non-Active

Association \_\_\_\_\_ Since \_\_\_\_\_ Status  Active  Non-Active

*If elected, I shall subscribe my name to the original copy of the Constitution and By-Laws. I do expressly undertake and agree to comply with the provisions of said Constitution and By-Laws and rules made by the agreements entered by the Association, as well as with any organization, group or body with which this Association is associated, allied or affiliated, or is a participant.*

\_\_\_\_\_  
(Date)

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

Recommended By \_\_\_\_\_

Date \_\_\_\_\_

To the Plumbing, Heating and Cooling Contractors of Long Island Inc.:  
We the undersigned committee to whom was referred the application of \_\_\_\_\_  
report that we find him \_\_\_\_\_ eligible and worthy of election to membership.

**INVESTIGATING COMMITTEE:**

\_\_\_\_\_

Submit Completed Application to [info@phccli.org](mailto:info@phccli.org) Subject Line: Include Company Name & "New Member Application"

Also Include the Following: Picture ID, Current Licensing. For Questions & Payment Please Call 516-922-7688