**NORTH CAROLINA PERMITTING PERSONNEL ASSOCIATION, INC.**

**MEMBERSHIP APPLICATION AND/OR RENEWAL FORM**

 **JULY 1, 2015TO JUNE 30, 2016**

An Associate Member shall consist of those people interested in the scope of the permitting process but are not directly engaged in processing permit documentation. (Example: Members of professions or trades in the construction industry.

**ASSOCIATE MEMBER - $ 60.00**

A Permitting Personnel Member shall be restricted to representative of municipalities or individuals employed by a unit of government such as cities, towns, counties or other political subdivisions performing the duties of processing permits in the State of North Carolina

**PERMITTING PERSONNEL MEMBER - $50.00 PER DEPARTMENT**

**PLEASE TYPE OR PRINT:**

**JURISDICTION:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**BUSINESS MAILING ADDRESS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CITY:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **STATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **ZIPCODE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PHONE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **FAX:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list (print) each person in your department to be a member of the NCPPA.

Attach additional pages, if needed.

**\*\*\*One member of each department required to be on e-mail “List Serve” to receive updates.\*\*\***

**First Member:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **List Serve E-Mail:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Second Member:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check if want to be on List Serv: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Third Member:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check if want to be on List Serv: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*\*\*MAKE CHECKS PAYABLE TO: NORTH CAROLINA PERMITTING PERSONNEL ASSOCIATION, INC.\*\*\***

**Return this application with payment no later than August 31, 2015 to:**

NCPPA

c/o Town of Kitty Hawk

Attention: Donna Heffernan

P.O. Box 549

Kitty Hawk, NC 27949