



AMERICAN COUNCIL OF ENGINEERING COMPANIES
of Georgia

Membership Application
Section I

Firm Name _____

Parent company (if branch or subsidiary) _____

Address _____

City/State/Zip _____

Phone _____ Fax _____

Website _____

Total Company-wide Personnel _____ Total Georgia Personnel _____

Branch in Georgia (attach separate sheet of to provide information on Branch offices)

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 |

Firm Description: Briefly describe the firm’s activities; attach an additional sheet if necessary:

ACEC/G Bylaws provide that each member firm shall designate one person who is entitled to one vote on behalf of the member firm for each matter submitted to a vote of the membership.

Designated Firm Representative: _____

Name of Professional Engineer(s) in Georgia Office(s): (use additional paper if needed)

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 | |



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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 |

For Office Use Only:

<input type="checkbox"/> Firm <input type="checkbox"/> Branch <input type="checkbox"/> Pay Direct <input type="checkbox"/> MO Incentive. Fill in percentage:

Georgia Certificate of Authorization to Practice No. _____

(As required by O.C.G.A. 43-15-23 from the State Board of Registration for Professional Engineers and Land Surveyors)

Is the firm headquartered in another state? If yes, which? _____

Statement of Independent Practice

This firm ___ does ___ does not have any commercial sales or contract interest or other affiliations which might cause a conflict of interest with the independent practice of consulting engineering.

I certify that the above statements are correct and that this firm will subscribe to the Bylaws of ACEC/G and conform to the Professional and Ethical Conduct Guidelines of ACEC.

Signature and Designated Voting Representative

Date



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Section II

Key Principal or Primary Contact (Required)

Full Name

Title

Email Address

Professional Role Within Firm

Add the names of staff members whom you feel would benefit from participation in ACEC/G. Your firm's ROI on your ACEC/G membership is directly related to the number of staff who are active in the Council. (Use separate sheets to provide additional names)

Full Name

Title

Email Address

Professional Role Within Firm

Full Name

Title

Email Address

Professional Role Within Firm

Each application must bear the endorsement of a sponsor who shall be a principal with an ACEC/G member firm.

Sponsor's Signature

Sponsor's Firm Name

New regular members must submit one quarter's dues along with their application in order to be eligible for membership approval by the Board of Directors. Membership application will NOT be presented for a Board vote until dues payment is received. Payment will be applied to current quarter per ACEC/G Bylaws. After approval, future dues payments will be invoiced quarterly. Questions? Contact Kathy Belcher • 404-521-2324 • kathy.belcher@gaengineers.org

Return the completed application to: Attention: ACEC/G Membership
233 Peachtree Street
Harris Tower, Suite 700
Atlanta, Georgia 30303



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STAY IN TOUCH WITH THE ENGINEERING COMMUNITY

(All Staff Members added to this roster will receive *The Georgia Engineer* magazine)

Full Name

Title

Email Address

Professional Role Within Firm

Full Name

Title

Email Address

Professional Role Within Firm

Full Name

Title

Email Address

Professional Role Within Firm

Full Name

Title

Email Address

Professional Role Within Firm

Full Name

Title

Email Address

Professional Role Within Firm

Full Name

Title

Email Address

Professional Role Within Firm



ROSTER FOR STAFF PARTICIPATION IN ACEC

Full Name

Title

Email Address

Professional Role Within Firm

Full Name

Title

Email Address

Professional Role Within Firm

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