

Associated Licensed Detectives of New York State, Inc.

Thank you for your interest in becoming a member of ALDONYS.

The Associated Licensed Detectives of New York State, Inc. (ALDONYS) was founded in 1950 and is New York's only professional association of licensed private investigators and contract security companies recognized by the Secretary of State.

Private investigators and security firms are affected by laws and regulations enacted by our state legislators and regulators. Membership in ALDONYS provides the following benefits:

Legislative Watch: Monitors and opposes detrimental legislation, through our retained legislative counsel.

ALDONYS SPOTLIGHT: Newsletter provides important information affecting private investigators and security professionals.

Directory and Web Site: Membership listings by name, company, geographical location, and specialty; and optional links to member web sites. Serves as an important tool for reciprocal assignments among members and a source of referrals.

Certificate and Awards: Annual membership certificate and periodic achievement awards for training and seminars. ALDONYS periodically holds seminars that provide the latest investigative techniques and state of the art security knowledge.

Meetings: Provides a forum for the exchange of ideas and networking among members and professional contacts.

To apply for membership, please complete and mail us the following:

- Membership Application Form
- Photocopy of your current private investigator or watch guard and patrol agency license
- A check in the amount of \$100.00 made payable to ALDONYS
- ALDONYS Directory and Web Site Listing Form

We look forward to you becoming a member of our organization.

Sincerely,

Joseph W. Biondo

ALDONYS President

Associated Licensed Detectives of New York State, Inc.

MEMBERSHIP APPLICATION

SUBJECT TO THE APPROVAL OF THE BOARD OF DIRECTORS, THE UNDERSIGNED HEREBY APPLIES FOR MEMBERSHIP IN THE **ASSOCIATED LICENSED DETECTIVES OF NEW YORK STATE, INC.**, AND KNOWING THAT THIS ASSOCIATION RELIES ON THE VERACITY OF THE APPLICANTS STATEMENTS HEREIN AS A CONDITION AND RETENTION OF MEMBERSHIP, FURNISHES THE FOLLOWING INFORMATION:

ACTIVE MEMBERSHIP SHALL BE LIMITED TO INDIVIDUALS, PARTNERSHIPS AND CORPORATIONS WHO ARE HOLDERS OF PRIVATE INVESTIGATOR AND/OR WATCH GUARD AND PATROL AGENCY LICENSES ISSUED BY THE STATE OF NEW YORK PURSUANT TO ARTICLE 7 OF THE GENERAL BUSINESS LAW. FOR THE PURPOSE OF MEMBERSHIP, THE MEMBER SHALL BE CONSIDERED THE AGENCY WITH ONE VOTE, AND ITS REPRESENTATIVE SHALL BE THE QUALIFIED PRINCIPAL, CORPORATE OFFICER OR BRANCH MANAGER OR THEIR DESIGNEE. DUES \$100.00 PER YEAR.

AFFILIATE MEMBERSHIP SHALL BE LIMITED TO INDIVIDUALS WHO ARE FULL TIME EMPLOYEES OF THE DULY LICENSED MEMBER AND/OR AN EMPLOYEE OF A DULY LICENSED PROPRIETARY COMPANY PURSUANT TO ARTICLE II, SECTION 3 OF THE CONSTITUTION AND BY-LAWS, WITH NO VOTING POWER AND THEIR MEMBERSHIP SHALL CEASE UPON THEIR TERMINATION OF SAID EMPLOYMENT. DUES \$100.00 PER YEAR.

I, _____ HEREBY CERTIFY THAT APPLICANT IS A FULL TIME EMPLOYEE SIGNATURE DATE _____.

ASSOCIATE MEMBERSHIP SHALL BE LIMITED TO INDIVIDUALS, PARTNERSHIPS AND CORPORATION OF ANY OTHER STATE, TERRITORY, DISTRICT OF COLUMBIA OR FOREIGN COUNTRY WHO OPERATE AS A LICENSED PRIVATE INVESTIGATOR AND/OR WATCH GUARD AND PATROL AGENCY OUTSIDE THE STATE OF NEW YORK, AND WHO CAN FURNISH PROPER AND APPROPRIATE PROOF OF LICENSING IN THEIR JURISDICTION, PURSUANT TO ARTICLE II, SECTION 4 OF THE CONSTITUTION AND BY-LAWS, WITH NO VOTING POWER. DUES \$100.00 PER YEAR.

APPLICANTS NAME _____ DATE OF BIRTH _____
POSITION/TITLE _____

TRADE OR CORPORATE NAME _____

STREET ADDRESS _____

P.O. BOX _____

CITY, STATE, ZIP _____ COUNTY _____

TELEPHONE _____ FAX _____

E-MAIL _____

PLEASE INDICATE WHETHER (_____) CORPORATION (_____) PARTNERSHIP (_____) SOLE PROPRIETORSHIP

PLEASE LIST NAMES, TITLE AND DATE OF BIRTH OF ALL PRINCIPALS, OFFICERS AND/OR PARTNERS

NAME	TITLE	DATE OF BIRTH
_____	_____	_____
_____	_____	_____
_____	_____	_____

NAME OF LICENSE HOLDER _____

DATE INITIAL LICENSE ISSUED _____ TYPE OF LICENSE (_____)PI (_____) WGP

NEW YORK STATE LICENSE NO. _____ EXPIRATION DATE _____

OTHER STATE OR LOCAL LICENSES _____

HAS A PRIVATE INVESTIGATOR OR WATCH GUARD AND PATROL AGENCY LICENSE OF ANY OF THE ABOVE NAMED EVER BEEN SUSPENDED OR REVOKED? _____ IF YES, PLEASE STATE PARTICULARS ON SEPARATE SHEET

NAME	TITLE	DATE OF BIRTH
_____	_____	_____
_____	_____	_____

AS A FURTHER CONDITION OF ADMISSION TO AND RETENTION OF MEMBERSHIP, THE UNDERSIGNED HEREBY AFFIRMS THAT I WILL COMPLY WITH THE CONSTITUTION, BY-LAWS, AND CODE OF ETHICS OF ALDONYS, AND I WILL ASSIST WHEREVER POSSIBLE IN PURGING UNETHICAL AND ABUSIVE PRACTICES, PROMOTE PUBLIC RESPECT AND CONFIDENCE FOR OUR PROFESSION, AND RENDER EFFICIENT, ETHICAL AND DEPENDABLE SERVICE.

SIGNATURE _____ TITLE _____ DATE _____

PLEASE COMPLETE A SEPARATE APPLICATION FOR EACH TYPE OF MEMBERSHIP. SEND YOUR COMPLETED APPLICATION, A PHOTOCOPY OF YOUR PRIVATE INVESTIGATOR/WATCH GUARD PATROL LICENSE AND YOUR CHECK MADE PAYABLE TO ALDONYS TO:

Associated Licensed Detectives of New York State, Inc. 118-35 Queens Blvd. Suite #1250 Forest Hills, NY 11375 718-793-3600

ALDONYS Directory and Web Site Listing

Date: / /

The following information will appear in the ALDONYS Membership Directory and Web Site upon ALDONYS Board approval of your membership

Company:
Title:
First Name:
Last Name:
Address:
City: State: Zip:
Phone: Ext.: Fax:
Member Type:
License Type:
County:
E-mail Address:
Web Site Address:

Circle up to FOUR (4) services below you or your company provide
PRIVATE INVESTIGATOR

AI	Accident Investigations	M	Matrimonial
AR	Accident Reconstruction	MP	Missing Persons/Heirs
AF	Arson, Fire and Explosion	PP	Pen and Pencil Testing
AS	Asset Searchers	PI	Personal Injury
BI	Background Investigations	PV	Photography and Video
BA	Bank and Accounting Fraud	PG	Polygraph
CR	Child Recovery	PE	Pre-Employment
CV	Civil Investigations	PS	Process Services
CR	Criminal Investigations	PL	Product Liability
CC	Computer Crime	PD	Property Damage
EC	Electronic Counter Measures	RS	Record Services
EN	Environmental	SS	Shopping Services
EW	Expert Witness	ST	Skip Tracers
FS	Forensic Services	SV	Surveillance
FR	Fraud	TP	Trial Preparation
OI	General Investigations	UN	Undercover
II	Insurance Investigations	WC	White Collar Crimes
MM	Malpractice, Medical/Legal	WK	Workers Compensation

WATCH GUARD AND PATROL AGENCY SERVICES

AG	Armed Guards
EP	Executive Protection
MP	Mobile Patrol
SC	Security Consulting
SS	Security Systems
UG	Unarmed Guards

Associated Licensed Detectives of New York State, Inc.
118-35 Queens Blvd., Suite #1250 Forest Hills, NY 11375
718-793-3600