



Association of Fire Districts of the State of New York, Inc.

**Please provide The Official Mailing Address
For All Correspondence Relating To Your Fire District**

Name of District: _____

Address: _____

Town/City: _____

Zip Code: _____ County: _____

Phone: _____ Fax: _____

Total Full Valuation: _____

Commissioner, Chairperson: _____ Phone: () _____

Address: _____ Zip: _____

Commissioner: _____ Phone: () _____

Address: _____ Zip: _____

Commissioner: _____ Phone: () _____

Address: _____ Zip: _____

Commissioner: _____ Phone: () _____

Address: _____ Zip: _____

Commissioner: _____ Phone: () _____

Address: _____ Zip: _____

Secretary: _____ Phone: () _____

Address: _____ Zip: _____

Treasurer: _____ Phone: () _____

Address: _____ Zip: _____

Deputy Treasurer: _____ Phone: () _____

Address: _____ Zip: _____

Attorney: _____ Phone: () _____

Address: _____ Zip: _____

DUES: \$ 65.00 FOR FULL VALUATION OF LESS THAN \$5 MILLION
\$ 95.00 FOR BETWEEN \$5 MILLION AND \$10 MILLION
\$ 125.00 FOR BETWEEN \$10 MILLION AND \$20 MILLION
\$ 225.00 FOR BETWEEN \$20 MILLION AND \$30 MILLION
\$ 285.00 FOR BETWEEN \$30 MILLION AND \$50 MILLION
\$ 375.00 FOR OVER \$50 MILLION
MUNICIPAL MEMBERSHIP SHALL BE \$150.00
PLEASE ENCLOSE PROPER AMOUNT \$ _____

PLEASE MAIL TO:

Frank A. Nocerino
Secretary/Treasurer
P.O. Box 1419
Massapequa, New York 11758
Phone: 1-800-520-9594
Fax: 516-799-2516

Signature: _____

"Serving Fire Districts Through Education"