



Associated General Contractors
of New York State, LLC



Northeastern Subcontractors
Association



Eastern Contractors
Association

4-Hour Erosion and Sediment Control (E&SC) Training (DEC Endorsed)

Program at a Glance:

- "4 Hour Erosion and Sediment Control Training"
- Wed. Oct. 9, 2019
- 6 Airline Drive, Albany, NY 12205

Contact:

Registration
Bryanna Kiselauskas
Bryanna@agcnys.org
P: 518-456-1134

Payment
Carla Plankenhorn
Carlap@agcnys.org
P: 518-456-1134

DATE: **Wednesday, October 9, 2019**
 TIME: **7:30 a.m. registration, 8:00am – 12:00pm class**
 PLACE: **Building Industry Center
6 Airline Drive, Albany, NY 12203**
 FEE: **\$90 per person for AGC NYS, ECA or NESCA
Members; \$115 for non-members.**
 TRAINER: **Jim Lieberum, CPESC, District Manager
Warren County SWCD**

Class is limited to first 50 registrants

Anyone arriving more than 15 minutes late to the class will not receive their Certificate of Completion and Wallet Card.

This DEC mandated 4-hour course is designed to inform individuals responsible for installing or maintaining erosion & sediment control practices in areas such as Construction, Grading, Excavating, Filling, Soil Stockpiling, Demolition, Clear-Cutting, Grubbing and Stump Removal.

The Trained Contractor Inspections require that the owner or operator of each construction activity have a trained contractor inspect the erosion and sediment control practices and pollution prevention measures being implemented within the active work area daily to ensure that they are being maintained in effective operating condition at all times. If deficiencies are identified, the contractor shall begin implementing corrective actions within one business day and shall complete the corrective actions in a reasonable time frame.

The card is valid for 3-years from the date of the course. This storm water training focuses on providing training required to comply with the contractor's responsibilities under the NYS DEC Construction Activity Permit No: GP-0-15-002.

Registration Form

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Name(s) _____

Company _____

Address _____

Phone _____ Fax _____ E-mail _____

Member of: AGC NYS ECA NESCA Non-Member

Type of Business: GC Subcontractor Supplier Other (specify)

Check is enclosed (payable to AGC NYS)

Please charge my credit card:

Card Holder Name: _____

Card Number: _____ Exp. Date _____ Sec. Code _____

Credit Card billing Address _____ Zip Code _____

Signature _____ Total Charge Amount \$ _____

Email address for receipt: _____

Cancellation Policy: Refunds will be given only if your reservation is cancelled 48 hours in advance.

E-mail, mail or fax form to: Bryanna Kiselauskas at bryanna@agcnys.org, AGC NYS, 10 Airline Drive, Suite 203, Albany, NY 12205. Fax 518-456-1198.