# ANSI ACCREDITED STANDARDS COMMITTEE A117

# ORGANIZATIONAL APPLICATION FOR MEMBERSHIP

Note: This form is to be use by an organization, association or other group requesting membership on the A117 Committee. Individuals & organizational representatives requesting membership should use the form INDIVIDUAL & REPERSENTATIVE APPLICATION FOR MEMBERSHIP.

It is the Organization that is the member of the A117 Committee, not their representatives.

Please provide the following information. It is important to complete <u>ALL</u> of the lines and questions on this form, supply additional requested information, and sign and date the application.

#### Part I. General Information

#### 1. Organization Information

Complete the following information on the Organization applying for membership. The "Contact" should be the main person at the organization's main office to communicate with on administrative matters such as updating contact information, and appointment of voting representatives. A Contact at the main office is required in addition to the listing below of an "Outside Contact" in another office.

| Organization  |     | National Electrical Manufacturers Association |  |          |      |         |       |              | NEMA |  |  |
|---------------|-----|---|--|----------|------|---------|-------|--------------|------|--|--|
| Main Contact: |     | Vince Baclawski                               |  |          |      |         |       |              |      |  |  |
| Title:        |     | Sr. Technical Director, Codes and Standards   |  |          |      |         |       |              |      |  |  |
| Address:      |     | 1300 North 17 <sup>th</sup> Street, Suite 900 |  |          |      |         |       |              |      |  |  |
| City:         | Ros | sslyn State:                                  |  |          | VA   | Zip +4: | 22209 | )            |      |  |  |
| Phone:        | 703 | 03-841-3236 800#:                             |  | <u> </u> | Ext: |         | Fax:  | 703-841-3336 |      |  |  |
| e-mail:       | Vin | Vin baclawski@nema.org                        |  |          |      |         |       |              |      |  |  |
| Web Site:     | ww  | v.nema.org                                    |  |          | •    |         |       |              |      |  |  |

# 2. <u>Outside Contact</u>: Complete the following if the Main contact for your Representatives is not located at the above address

| Outside Contact: |                       | Denise L. F                  | appas  |        |      |         |       | <u> </u>     |  |  |
|------------------|-----------------------|------------------------------|--------|--------|------|---------|-------|--------------|--|--|
| Title:           |                       | Business Development Manager |        |        |      |         |       |              |  |  |
| Address:         | Address:              |                              | s Road |        |      |         |       |              |  |  |
| City:            | Roar                  | noke                         |        | State: | VA   | Zip +4: | 24019 | )            |  |  |
| Phone:           | 540-                  | 540-563-2000 800#:           |        |        | Ext: | 278     | Fax:  | 540-362-9800 |  |  |
| e-mail:          | pappasdenisel@aol.com |                              |        | TDD #: |      | ·       |       |              |  |  |

| 3. <u>ir</u>  | <u>itere:</u>  | st Category (check one)   |                          |                       |                             |                           |                              |                       |  |
|---|--|---|--------------------------|-----------------------|-----------------------------|---------------------------|------------------------------|-----------------------|--|
| U<br>ye   | sing to  | the Interest categories listed below, indicate the category that best relates to representation on the committee. |                          |                       |                             |                           |                              |                       | ory that best relates to                                       |
| [   | E  | uilder/Owner/Operator Consumer/User Professional  |                          |                       |                             |                           |                              |                       |  |
|   | X F  | Producer/Distributor Regulatory   |                          |                       |                             |                           |                              |                       |  |
| Interest Ca   | <u>tegori</u>  | es:   |                          |                       |                             |                           |                              |                       |  |
| Builde<br>develo                                      | Builder/Owner/Operator (BO) Members in this category include those in the private sector involved in the development, construction, ownership and operation of buildings or facilities; and their respective associations. |   |                          |                       |                             |                           |                              |                       |  |
| <ul> <li>Consu</li> </ul>                             | mer/U  | ser (CU) Men  | nbers in th              | nis cate              | egory includ                | e those wi                | h disabilitie                | s or oth              | ners who require accessibility respective associations.        |
| KHOWIE  | euge an  | (P) Members<br>d policy releva<br>d their respecti  | nt to their              | area o                | of practice, s              | ose qualifi<br>uch as res | ed to engag<br>earch, testir | ge in the             | e development of the body of<br>ulting, education, engineering |
| <ul> <li>Production</li> <li>of production</li> </ul> | c <mark>er/Dis</mark><br>lucts; a  | tributor (PD)<br>nd their respec  | Members                  | s in this<br>ciation  | s category ir               | clude thos                | se involved i                | in manuf              | acturing, distributing, or sales                               |
| <ul> <li>Regula<br/>organiz</li> </ul>                | atory (<br>zations   | (R) Members<br>that promulga  | in this ca<br>te or enfo | tegory<br>rce co      | include fed<br>des or stand | deral agen<br>dards; and  | cies, repres                 | sentative             | es of regulatory agencies or sociations.                       |
|   | _  |   |                          |                       | _                           |                           |                              |                       |  |
|   |  | ganizat   |                          |                       |                             |                           |                              |                       |  |
| Complete  | e the  | following in  | format                   | ion o                 | n the Prir                  | ncipal ar                 | nd Altern                    | ate Re                | epresentative for your   |
| organization.   |  |   |                          |                       |                             |                           |                              |                       |  |
| (O<br>A   | rganız<br>Iternat  | ational memb<br>le's vote is co   | pers are a<br>nunted or  | allow t<br>ally if th | to have bo<br>ne Principa   | th a Princ<br>Il Represe  | ipal and A<br>entative fa    | Iternate<br>ils to vo | Representative. An ote.)                                       |
| Principal Voting                                      |  |   |                          |                       |                             |                           | <u>.</u>                     |                       |  |
| <u> </u>  | Representative:  |   |                          |                       |                             |                           |                              |                       |  |
| Γitle:  |  |   |                          |                       |                             |                           |                              |                       |  |
| Company:<br>Address:                                  |  |   |                          |                       | <del></del> -               |                           |                              | _                     | Acronym:   |
| City:   | LMan   |   | <del></del>              |                       | <del></del>                 | <u> </u>                  |                              | _                     |  |
| Phone:  | vvasi  | hington   | T 000#                   |                       | State:                      | DC                        | Zip +4:                      | 200                   | T  |
| e-mail:   | <u> </u>   |   | 800#:                    | <u> </u>              |                             | Ext:                      |                              | Fax:                  | =  |
| -iliali.  | <u></u>  |   | <u> </u>                 |                       |                             | TDD #:                    |                              |                       |  |
|   | ternate Voting<br>epresentative:   |   |                          |                       |                             |                           |                              |                       |  |
| itle:   |  | Business De   | velopmer                 | it Mana               | ager                        |                           |                              |                       |  |
| Company:  |  | Valcom, Inc.  |                          |                       |                             |                           |                              | <u> </u>              | Acronym:   |
| ddress:   |  | 5614 Hollins  | Road                     | · .                   |                             |                           | <u>-</u>                     |                       |  |
| City:   | Roan   | oke   |                          | _                     | State:                      | VA                        | Zip +4:                      | 24019                 |  |
| hone:   | 540-5  | 63-2000   | 800#:                    |                       |                             | Ext:                      | 278                          | Fax:                  | 540-362-9800   |
|   |  |   |                          |                       |                             |                           |                              | <u> </u>              |  |

## Part III. Funding

Who or what organization, company, interest, etc., would fund your participation on the Committee? (Specify names, address, telephone and contact's title as appropriate)

| Funding by    |                    | Valcom, Inc. Acronym:        |   |       |      |         |       |              |  |  |  |
|---------------|--------------------|------------------------------|---|-------|------|---------|-------|--------------|--|--|--|
| Main Contact: |                    | Denise L. Pappas             |   |       |      |         |       |              |  |  |  |
| Title:        |                    | Business Development Manager |   |       |      |         |       |              |  |  |  |
| Address:      |                    | 5614 Hollins Road            |   |       |      |         |       |              |  |  |  |
| City:         | Ro                 | anoke State:                 |   |       | VA   | Zip +4: | 24019 | )            |  |  |  |
| Phone:        | 50                 | 04-563-2000 800#:            |   |       | Ext: | 278     | Fax:  | 540-362-9800 |  |  |  |
| e-mail:       | dpappas@valcom.com |                              |   | TDD#: |      |         |       |              |  |  |  |
|               |                    |                              | • |       |      |         |       |              |  |  |  |

| Part IV. | Authority | and I | Partici <sub>i</sub> | pation      |
|----------|-----------|-------|----------------------|-------------|
|          |           |       |                      | <b>3000</b> |

|    | · · · · · · · · · · · · · · · · · · ·  |
|----|--|
| 1. | Are your Organization's Representative(s) authorized to vote on behalf of your Organization? (Appropriate Authorization may be required.)  |
|    | X Yes No   |
| 2. | Will your Organization's Representative(s) be instructed how to vote?  |
|    | X Yes No   |
| 3. | If so, can the time constraints of the consensus process be maintained?  |
|    | X Yes No   |
| 4. | Provide assurance of active participation on the Committee. Will your Organization and its Representatives be able to participate in the full work of the Committee such as attending Committee meetings and responding to correspondence? |
|    | X Yes No   |

### Part V. Background and Experience

#### Please complete the following. Attach résumés or additional sheets as necessary.

1. State why you wish representation on the A117 Committee and provide specific relationship to one or more elements of Committee work.

To provide technical knowledge of the communication products covered in Chapter 7 of ICC A117.1. Additionally, my sister was in a wheel chair and my grandmother was deaf. Both have helped open my eyes through personal experience the challenges presented in these situations.

2. State the extent to which the A117.1 Standard directly and materially affects your interest.

NEMA represents manufacturers of communication elements and features that fall under the scope of Chapter 7 of ICC A117.1.

3. Provide evidence of expertise in areas relevant to the A117 Committee and the Interest category your have selected in Part 1 - #2 above.

NEMA is able to provide technical knowledge of the communication products covered in Chapter 7 of ICC A117.1.

#### Part VI. Additional Information

Provide any additional information as may be appropriate to assist in the evaluation of your application. Attach additional sheets if necessary.

See Attached Resume

#### Part VII. Certification

Considerable effort, devotion and hard work will be expected of each Committee member. Committee membership carries an obligation to participate actively in all work of the Committee including the contribution and generation of information, prompt reply to draft reports and ballots, attendance and participation at Committee meetings and prompt completion of assigned tasks. The undersigned hereby agrees to notify the International Code Council of a change in any of the information provided in this application including a change in the organization represented, source of funding or employment. The undersigned agrees to abide by the rules and policy of the International Code Council. The undersigned attests that the information provided in this application for Committee membership is true and accurate.

The undersigned hereby agrees that his or her authorship to ICC in connection with work performed as a member of an ICC committee are considered works made for hire for ICC. To the extent that the undersigned retains any rights in copyright as to such authorship contributions, the undersigned hereby grants and publications that use such contributions by the undersigned and certifies to the best of his or her knowledge that such contributions are not protected by the copyright of any other person or entity.

Signature: Lywe Lappas

Title: Business Land Mandustry Gratures

Date: 23 2014

#### **Mail Completed Application to:**

International Code Council, Inc. Secretariat - ANSI ASC A117 Chicago District Office 4051 W. Flossmoor Road Country Club Hills, Illinois 60478

> (888) 422-7233 ph (708) 799-0320 fx

E-mail: ewirtschoreck@iccsafe.org