

BC 1 CALL

Appendix A

MEMBER INFORMATION FORM

To the member's agreement between BC	One Call Limited ("BC 1 Call" or the
"Supplier") and	, dated,
20 (member's agreement).	

BC 1 Call uses the information contained in this form to process locate requests and to communicate with your organization in connection with the Member's Agreement. * required

1.	Legal name of organization	on*:	
2.	Head Office Mailing Address*:		
	City*:	Province*:	Postal Code*:
3.	Corporate website URL (T Call's <u>Member List</u>)*: www		
4.	Invoicing/Accounts Payab	ble	
	Name*:	Title*:	
	Telephone Number*: ()	Email*:	
	Invoicing Empile	DO Num	har (if applicable).

 Name*: ______ Title*: ______

 Telephone Number*: () ______ Email*: ______

 Invoicing Email: ______ PO Number (if applicable): ______

 Mailing Address (if different than above): ______

 City: ______ Province: _____ Postal Code: ______

Click or call before you dig.

5. Contact for Data Input Correspondence Provide a single contact, responsible for preparing, maintaining, and verifying your data base. Name*: ______ Title*: ______ Telephone Number*: () ______ Email*: ______ Company Name (if using a third party): ______ Mailing Address (if different than above): ______ City*: _____ Province*: ____ Postal Code*: ______

6. Field Office Contacts and Notification Details Service Area: _____

Note: A Service Area is each area which has a unique database registered with the Supplier. Enter "ALL" above if the contact information is the same for all of the Member's Service Areas.

Routine Locate Notifications			
FTP/Email Address*:	Phone Number During Business Hours		
	Primary*:	Alternate*:	
Username (FTP):	Phone Number Outside of Bus	Phone Number Outside of Business Hours	
Password (PTF):	Primary:	Alternate:	

Emergency Locate Notifications		
FTP/Email Address:	Phone Number Outside of Business Hours	
	Primary*:	Alternate*:
Username (FTP):	Password (PTF):	

Dig Up Notifications		
FTP/Email Address*:	Phone Number During Business Hours	
	Primary*:	Alternate*:
Username (FTP):	Phone Number Outside of Business Hours	
Password (PTF):	Primary*:	Alternate*:

Click or call before you dig.

Business Hours (in PST)		
Weekday	Opens at*	Closes at*
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		

7. General Contact for Complaints, Transmission Issues, Email Issues, etc.*

Name*:	Title*:
Telephone Number*: () Email*:

If the above person has	not resolved the problem, whom do we contact next?*
Name*:	Title*:
Telephone Number*: () Email*:

8. Contact for Public Awareness and/or Communications initiatives about ground disturbance:

 Name:
 Title:

 Telephone Number:
 ______Email:

9. Name of Person Who Completed This Form*:

Name*:	Title*:
Telephone Number*: () Email*:

As a BC 1 Call member, and to ensure our service is convenient to excavators, you are obligated to:

- Respond to each notification you receive **within 3 business days** (excluding statutory holidays in B.C.);
- Establish contact with the ground disturber related to each notification BC 1 Call sends to you;

Click or call before you dig.

• Advise BC 1 Call of any changes to this information by providing a new Appendix A. The form can be found on our <u>Members Resources</u> page.

Signature*:	
Date*:	_

If you have any questions concerning this form, please contact BC 1 Call at 1-800-474-6886, option 3 or by email at <u>info@bc1c.ca</u>.

Please return this form to info@bc1c.ca.

Section below should be filled out by BC 1 Call staff:

Date Received by BC 1 Call: _____

Click or call before you dig.