



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*: _____

2. Head Office

Mailing Address*: _____

City*: _____ Province*: _____ Postal Code*: _____

Street Address (if different): _____

City: _____ Province: _____ Postal Code: _____

3. Invoicing/Accounts Payable

Name*: _____ Title*: _____

Telephone Number*: () _____ Email*: _____

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

Mailing Address (if different than above) _____

City: _____ Province: _____ Postal Code: _____

4. Contact for Data Input Correspondence

Provide a single contact, responsible for preparing, maintaining, and verifying your data base.

Click or call before you dig.



Name*: _____ Title*: _____
 Telephone Number*: () _____ Email*: _____
 Company Name (if using a third party): _____
 Mailing Address*: _____
 City*: _____ Province*: _____ Postal Code*: _____

5. 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 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*:

Business Hours (in PST)		
Weekday	Opens at*	Closes at*
Sunday		
Monday		
Tuesday		

Click or call before you dig.



Wednesday		
Thursday		
Friday		
Saturday		

6. 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*: _____

7. Name of Person Who Completed This Form:

Name*: _____ Title*: _____

Telephone Number*: () _____ Email*: _____

Signature*: _____

It is your responsibility to advise BC 1 Call of any changes to this information. Upon request an update form will be supplied.

As a BC 1 Call member, you are obligated to respond to each notification you receive and establish contact with the ground disturber related to each Notification BC 1 Call sends to you.

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

Please return this form to info@bc1c.ca.

Date Received by BC 1 Call: _____

Click or call before you dig.