

ne1call.com



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Telephone: (866) 711-7281 Fax: (800) 896-0664
Email: ne@occinc.com

MEMBERSHIP INFORMATION FORMS

For assistance with forms call the Database Department at 866-711-7281.

Complete the information on the applicable page(s) of this packet. Changes may be submitted by scanning and emailing to ne@occinc.com or by faxing completed forms, including this page as the cover, to 800-896-0664.

Company Name: _____

District Code: _____

Submitted by: _____

Signature: _____

Telephone #: (_____) _____ - _____ **Date:** _____

BILLING INFORMATION

- **Members are charged \$1.14 per notification ticket (\$0.99 ticket fee + \$0.15 administration fee).**
- **Members receive a \$0.39 discount per ITIC ticket received.**
- **Members are not charged for audits, broadcast messages, or retransmitted notifications.**
- **Pre-pay and quarterly billing options are available.**
- **Invoices are emailed/faxed within the first 3 business days of the month and mailed on or before the 10th of the month.**

Enter all information exactly as it should appear on the invoice.

Company Name: _____

Contact Name: _____

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Telephone: (_____) _____ - _____ **Ext:** _____

Email Address: _____

Fax: (_____) _____ - _____

Purchase Order # (if applicable): _____

Select delivery method:

- Email (free)**
- Fax (free)**
- USPS (\$5.00 per invoice)**

CONTACT INFORMATION

This is who we reach out to for any membership concerns/questions.

Primary Contact Person:

Contact Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: (_____) _____ - _____ Ext: _____

Fax: (_____) _____ - _____

Email Address: _____

Alternate Contact Person:

Contact Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: (_____) _____ - _____ Ext: _____

Fax: (_____) _____ - _____

Email Address: _____

Mapping/GIS Contact Person:

same as Primary Contact Person same as Alternate Contact Person

Contact Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: (_____) _____ - _____ Ext: _____

Fax: (_____) _____ - _____

Email Address: _____

OFFICE INFORMATION

Office Hours:

- From _____ to _____ central time on the following days of the week:
Sun Mon Tue Wed Thur Fri Sat
- Open 24 hours a day
- No set office hours

Referral Numbers:

These phone numbers will be given to a caller who wishes to contact you directly for additional information.

General questions during working hours

Phone #: (_____) _____ - _____

General questions after working hours

Phone #: (_____) _____ - _____

Repair department during working hours

Phone #: (_____) _____ - _____

Repair department after working hours

Phone #: (_____) _____ - _____

Design/Survey questions

Phone #: (_____) _____ - _____

Counties facilities are located in: _____

UTILITY TYPE INFORMATION

Type of underground facilities you own:

ELECTRIC

Electric lines should be marked in RED and include electric power lines (primary and secondary), cables, conduit and lighting cables.

- Electric 'Facility Identifiers' include:

E	Electric
RR	Railroad Signal
SL	Street Lighting
TS	Traffic Signal

GAS

Gas lines should be marked in YELLOW and include gas, oil, steam, petroleum or gaseous material mains and services.

- Gas 'Facility Identifiers' include:

CH	Chemical
G	Gas
LPG	Liquefied Petroleum Gas
PP	Petroleum Products
STM	Steam

WATER

Water lines should be marked in BLUE and include potable water mains and services.

- Water 'Facility Identifiers' include:

W	Water
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SEWER

Sewer lines should be marked in GREEN and include sanitary sewer, storm sewer and storm drains.

- Sewer 'Facility Identifiers' include:

S	Sewer
SD	Storm Drain
SS	Storm Sewer

TELECOMMUNICATIONS

Telecommunication lines should be marked in ORANGE and include communication, fiber optic, alarm or signal lines, cables or conduit.

- Telecommunication 'Facility Identifiers' include:

FO	Fiber Optic
TEL	Telephone

CABLE TV

Cable TV lines should be marked in ORANGE. This category includes cable TV mains and services.

- Cable TV 'Facility Identifiers' include:

TV	Television
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TICKET RECEIVING INFORMATION

This is where you receive all locate tickets 24/7.

Please choose ONE method to receive all locate requests:

LOCATOR TICKET MANAGEMENT*

(will need to coordinate with call center to get login created)

* Can also receive by one of the below methods without additional charges when LTM is selected

EMAIL

Email address(s): _____

FTP or SFTP

Server Address: _____

Username: _____

Password: _____

TEXT MESSAGE

Cell Phone #: _____

(_____) _____ - _____

Carrier (i.e. Sprint): _____

FAX

Fax number: _____

(_____) _____ - _____

AUTOMATED PHONE CALL

Phone #: _____

(_____) _____ - _____

Alternate #: _____

(_____) _____ - _____

Each day shortly after midnight you'll receive a daily audit report. The purpose of the daily audit report is to give the member the ability to compare the ticket numbers listed on the audit against the ticket received the previous day. It also allows the call center to know if there's an issue with the receiving site.

BACKUP MESSAGE INFORMATION

Backup messages are sent in addition to the regular ticket locate request as a courtesy to notify the member utility that an emergency/short notice ticket has been sent.

Send Backup Messages DURING work hours via (select one):

Text message

Cell Phone #: (_____) _____ - _____

Carrier (i.e. Sprint): _____

Automated phone call

Phone #: (_____) _____ - _____

Alternate #: (_____) _____ - _____

Email

Fax

(_____) _____ - _____

Send Backup Messages AFTER work hours via (select one):

Text message

Cell Phone #: (_____) _____ - _____

Carrier (i.e. Sprint): _____

Automated phone call

Phone #: (_____) _____ - _____

Alternate #: (_____) _____ - _____

Email

Fax

(_____) _____ - _____