



824 Weathered Rock Road, Jefferson City, MO 65101-1839  
573-635-1818 • Fax: 573-635-8402  
www.mo1call.com

## MEMBERSHIP INFORMATION FORMS

The following information is essential for us to service your membership in the Missouri One Call System (MOCS).

Read the entire packet before completing.  
Do not use pencil and make a copy for your records.

To enter the information online send an email to the address below to request a username and password.

Scan & email the packet to:  
[beckyh@mo1call.com](mailto:beckyh@mo1call.com) or;  
Fax to 573-635-8402.

---

**Company Name:**

*Enter your company name the way you want it to be announced to the excavating public and appear on invoices.*

---

Select your Status:       New Member       Existing Member

---

District Code (s):

*New members will be assigned a district code on activation.*

---

Name of Person Completing these Forms:

---

Signature:

---

Telephone Number:

---

Date:

## CONTACT INFORMATION

Due to security reasons, it is the Missouri One Call System policy not to provide, accept or change the membership information provided on the following pages or make changes to the mapping database unless it is submitted or authorized by the appropriate contact entered on this page.

### LEGAL OR ADMINISTRATIVE CONTACT

This person is authorized to receive the ballot to vote at our annual board elections, receives meeting notices and newsletters and serves as the primary point of contact.

Company Name:		
Name of Legal/Admin. Contact:		
Title:		
Address:		
City:	State:	Zip code:
Phone Number: (Best Number to Call):		
Alternate Number:		
Fax Number:		
Email Address:		

### MAPPING DATABASE/GIS CONTACT

This person is the authorized representative designated to administer the mapping database. All revisions must be approved by this person. Revisions can be submitted by the Legal/Administrative Contact.

**Check here if the information is the same as the Legal/Administrative Contact.**

Name of GIS/Mapping Contact:		
Title:		
Address:		
City:	State:	Zip code:
Phone Number: (Best number to call):		
Alternate Number:		
Fax Number:		
Email Address:		

## BILLING INFORMATION

Invoices are emailed or faxed on or about the 1st day of the month. If you elect to receive your invoices by United States Postal Mail they should be delivered by the 10th day of the month. There are no set-up or annual fees. Members are billed monthly with a 30-day term policy.

## CONTACT INFORMATION

This person or department receives the monthly invoice and will be our contact for any billing questions or correspondence.

Name of Billing Contact::		
Title:		
Address:		
City:	State:	Zip code:
Phone Number: (Best Number to Call):		
Alternate Number:		
Fax Number:		
Email Address:		

## PURCHASE ORDER OR CONTRACT NUMBER

If your company requires a Purchase Order, Contract Number or another identifier on the invoice enter it below:

Purchase Order, Contract Number, Other:
---

## INVOICING METHODS-CHOOSE ONE METHOD

*Beginning January 1, 2012 you will be billed a surcharge of \$5.00 per month for invoices delivered through the United States Postal Mail Service.*

<input type="checkbox"/> <b>Send Invoices by EMAIL</b> - Invoices are emailed within the 1st <u>three</u> Business Days each month. We can deliver to more than one email address. We cannot deliver to AOL addresses.
Email Address:
Email Address:

<input type="checkbox"/> <b>Send Invoices by FAX</b> - Invoices are faxed within the 1st <u>three</u> Business Days each month.
Enter Fax Number here:

<input type="checkbox"/> <b>Send Invoices through Regular Postal Delivery.</b> <i>I understand there will be surcharge of \$5.00 added to the invoice each month to receive by USPS. The surcharge will appear on your billing invoice.</i>
---

## GENERAL INFORMATION

### TYPE OF UNDERGROUND FACILITIES

Select the type of underground facilities that best describe the underground facilities that your utility or organization owns/operates. Do Not Check Utilities that Provide Services to You.

<input type="checkbox"/> CH-Chemical	<input type="checkbox"/> E-Electric	<input type="checkbox"/> S-Sewer
<input type="checkbox"/> G-Gas	<input type="checkbox"/> RR-Railroad Signal	<input type="checkbox"/> SP-Slurry System
<input type="checkbox"/> PP-Petroleum Products	<input type="checkbox"/> SL-Street Lighting	<input type="checkbox"/> SS-Storm Sewer
<input type="checkbox"/> LPG-Liquefied Petroleum Gas	<input type="checkbox"/> TS-Traffic Signal	<input type="checkbox"/> SD-Storm Drain
	<input type="checkbox"/> FO-Fiber Optic	<input type="checkbox"/> STM-Steam
	<input type="checkbox"/> TEL-Telephone	<input type="checkbox"/> W-Water
	<input type="checkbox"/> TV-Television	<input type="checkbox"/> W-Reclaimed Water "purple"

### HOURS OF OPERATION

Enter Your Company Business Hours Below.

<input type="checkbox"/> Open 24 Hours a day; 365 days a year. Leave the Holiday Schedule below blank if checked.
---

**OR Enter your Office Business Hours and Business Days of Operation below.** Anything outside of Business Hours & Days of Operation are treated as After Hours:

Open From:		a.m. (CST)	To:		p.m. (CST)
------------	--	------------	-----	--	------------

Select Business Days of Operation:	<input type="checkbox"/> Sun	<input type="checkbox"/> Mon	<input type="checkbox"/> Tue	<input type="checkbox"/> Wed	<input type="checkbox"/> Thur	<input type="checkbox"/> Fri	<input type="checkbox"/> Sat
------------------------------------	------------------------------	------------------------------	------------------------------	------------------------------	-------------------------------	------------------------------	------------------------------

### HOLIDAYS OBSERVED

The dates observed by the State of Missouri are used for the following holidays and will be updated automatically each year. Select the holidays your office will observe. Holidays selected are treated as After Hours.

<input type="checkbox"/> New Years Day	<input type="checkbox"/> Martin Luther King Day	<input type="checkbox"/> Lincoln's Birthday	<input type="checkbox"/> Presidents Day
<input type="checkbox"/> Truman's Birthday	<input type="checkbox"/> Memorial Day	<input type="checkbox"/> July 4th	<input type="checkbox"/> Labor Day
<input type="checkbox"/> Columbus Day	<input type="checkbox"/> Veterans Day	<input type="checkbox"/> Thanksgiving	<input type="checkbox"/> Day after Thanksgiving
<input type="checkbox"/> Christmas Eve	<input type="checkbox"/> Christmas Day		

If your office is closed any other days of the year, enter them below. You will need to update this information annually.

Date: \_\_\_\_\_ Date: \_\_\_\_\_

## REFERRAL CONTACT INFORMATION

The information that you provide on this page are contact names and telephone numbers that we can "refer" to an excavator that may need to contact someone at your utility for General Questions, Repair, Design & Pre-Engineering questions. This information is required.

### BUSINESS HOURS

#### 1. GENERAL QUESTIONS-BUSINESS HOURS

Name of Person or Department:
Telephone Number:
Alternate Telephone Number (Not Required):

#### 2. REPAIR DEPARTMENT-BUSINESS HOURS

Check here if the information is the same as # 1.

Name of Person or Department:
Telephone Number:
Alternate Telephone Number (Not Required):

#### 3. DESIGN OR PRE-ENGINEERING QUESTIONS-BUSINESS HOURS

Check here if the information is the same as # 1.

Name of Person or Department:
Telephone Number:
Alternate Telephone Number (Not Required):

### AFTER BUSINESS HOURS

#### 4. GENERAL QUESTIONS-AFTER BUSINESS HOURS

Name of Person or Department:
Telephone Number:
Alternate Telephone Number (Not Required):

#### 5. REPAIR DEPARTMENT-AFTER BUSINESS HOURS

Check here if the information is the same as # 4.

Name of Person or Department:
Telephone Number:
Alternate Telephone Number (Not Required):

## PRIMARY TICKET RECEIVING SITE

## CONTACT INFORMATION

Enter a contact name and telephone number below. This will be the person that our IT Department will contact if we are unable to transmit locate notifications to your receiving device.

Name of Person or Department:
Telephone Number:
Alternate Telephone Number:

### TICKET DELIVERY METHOD-CHOOSE ONE

*Beginning January 1, 2012, if you receive your locate notifications by FAX there will be a surcharge of \$0.25 cents per ticket AFTER the first 30 faxed ticket transmissions each month. This surcharge will appear on your billing invoice. To avoid the surcharge we suggest you consider choosing to receive your notifications by email, text or through FTP.*

<input type="checkbox"/> <b>Email</b> - Must sign the Internet Release on the next page. We <b>cannot</b> accept AOL addresses.																			
You can enter multiple email addresses but cannot exceed the number of boxes below. Enter 1 character per box. Include a comma between email addresses [a comma = 1 characters] Overfill from one line to the next if necessary.																			

<input type="checkbox"/> <b>Text Message to a Mobile Device</b> - Must sign the Internet Release on the next page. Read about Text Messages on Page 8.	
Mobile Device Telephone Number (Limited to 1):	
Enter Carrier (i.e., Sprint, AT&T, etc):	

<input type="checkbox"/> <b>FTP</b> - File transfer protocol transfers data from one computer to another via the Internet or through a network. Contact your Network Administrator to find out if you have FTP capability.	
Server Address:	
Username:	Password:

<input type="checkbox"/> <b>Fax Transmission.</b> <i>I understand there will be a surcharge of \$0.25 cents per ticket AFTER the first 30 faxed ticket transmissions each month, beginning Jan. 1, 2012. This surcharge will appear on your billing invoice.</i>	
Enter Fax Number:	

## INTERNET RELEASE

The Internet Release applies to any member that elects to receive notifications to their primary or secondary receiving site via email or text message. This release does not apply to transmissions through the File Transfer Protocol (FTP).

The following language is to release and to protect Missouri One Call System, Inc. ("MOCS") and One Call Concepts, Inc. ("OCC") from liability should a locate ticket, report or communication be lost or not receivable due to a failure of the Internet system.

By signing below, you agree on behalf of your company or organization to release, remise and forever discharge, for itself and its predecessors, principals, agents, successors, and assigns, MOCS and/or OCC, and any of their officers, directors, members, shareholders, agents, employees, successors and assigns from any and all claims, demands, damages, actions, rights or causes of action or suits at law, or in equity of whatsoever kind or nature, arising from, or by reason of, or in any way connected with, any losses, business losses, lost profits, lost revenue, or opportunities, damages, personal or bodily injury, death, disability, suffering, property damage or loss, or the results thereof, (collectively referred to hereinafter as "loss") which hereafter may be sustained by your company or organization as a direct or indirect result of any act or omission committed by or on behalf of MOCS and/or OCC in, or as part of, the transmission of or attempt to transmit, any tickets, reports or other information by or through the use of electronic mail or other electronic communication or transmission devices or services available over the internet but only to the extent that the content of such tickets, reports or other information is altered or distorted in the course of such transmission, or the delivery of such tickets, reports or other information is delayed or fails, or otherwise the loss is sustained for reasons beyond the reasonable control of MOCS or OCC.

Company: \_\_\_\_\_  
By: \_\_\_\_\_  
Title: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Date: \_\_\_\_\_

I have read and understand the information set forth above.

Signature: \_\_\_\_\_

Please print, date, sign and fax back to Missouri One Call System, Inc., at fax number 573-635-8402. No changes can be made until this form is received.

*[The Internet Release was last revised June, 2006].*

**READ THIS PAGE BEFORE COMPLETING PAGE 9**

## ABOUT BACKUP MESSAGES

Members have the option of choosing to receive a supplemental message as a back-up for priority locate requests **in addition to** their normal ticket receiving destination to enable you to provide a more immediate response to Emergencies, Dig-ups, Non Compliance and No Response locate requests. You are not required to use this service.

*As of January 1, 2012 there will be a \$2.50 per phone call made by a live CSR from our Call Center.*

## BACKUP MESSAGE DELIVERY METHODS

**1. Text Message to Mobile Text Device** -will be delivered in a format designed to accommodate mobile text devices. The mobile format provides sufficient information to be able to respond to a ticket while in the field or away from the office. The message will include the ticket number, ticket type, start date/time, excavator contact information the address and nearest intersecting street.

**Sample text:**

Subject: TKT 73670005  
EMERGENCY  
5/04/07 10:00AM  
BOB MURPHY @ 5735555555  
123 MAIN ST at 1st ST

To review the entire locate request on our website go to [www.mo1call.com](http://www.mo1call.com), click on the Ticket Search icon on the left hand side of the screen which will take you to NTMS, enter the ticket number in the first field in the middle of the page on the NTMS screen.

**2. Email** - locate requests are transmitted by email immediately after the request is made. You will receive the full ticket information along with a map link at the bottom of the ticket to show where the dig site is in correlation to your facilities;.

**3. Automated Phone Call via an Interactive Voice Recording (IVR) System** will call the Primary Telephone Number provided. Once contact is made you will be able to follow the prompts to collect the necessary information to respond to the ticket and "Press 9" when complete.

**4. Manual Phone Calls** will be made by a live CSR from our Call Center to the Primary Phone Number provided. This Phone Number must go to a line that is answered promptly by someone who is familiar with the one-call process. He/she can obtain the information from the CSR that they will need to be able to respond to the ticket. If an answering machine or voice mail is encountered a message will be left with the ticket number, ticket type, start date/time & excavator contact information. The message will be considered delivered and released. Otherwise, two (2) attempts will be made to the Primary Phone Number or one (1) attempt to the Primary Telephone Number and (1) attempt to the Alternate Telephone Number if listed. If no contact is made the message will be released without contact.

*As of January 1, 2012 there will be a \$2.50 per Manual Phone Call made by a live CSR from our Call Center.*

## BACKUP MESSAGE INFORMATION

You can receive a supplemental backup message by Text to a Mobile Device, Email, Automated Phone Call, or a Manual Telephone Call made by a live CSR from our Call Center.

**Instructions:** If you check Yes to any Ticket Types in Box 1 below, you must choose a Method in Box 2. If you check Yes to any Ticket Types in Box 3, you must choose a method in Box 4.

**BUSINESS HOURS SECTION**

<b>Box 1. Do you wish to receive a back-up message (in addition to the regular ticket transmissions) for any of these four (4) Ticket Types <u>During Business Hours</u>? Check "Yes" or "No" in the boxes.</b>					
Emergency	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Dig-Up	<input type="checkbox"/> Yes	<input type="checkbox"/> No
No Response	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Non Compliance	<input type="checkbox"/> Yes	<input type="checkbox"/> No

<b>Box 2. How would you like to receive the supplemental back-up messages for the ticket types selected on #1-<u>During Business Hours</u>? (Choose One ):</b>					
<input type="checkbox"/> Text Message:	Phone #:		Carrier:		
<input type="checkbox"/> Email (Enter One Email Address):					
<input type="checkbox"/> Automated Phone Call:	Phone #:				
	Alt #:				
<input type="checkbox"/> Manual Phone Call. <i>I understand there will be a surcharge of \$2.50 Per Manual Call.</i>	Phone #:				
	Alt #:				

**AFTER BUSINESS HOURS SECTION**

<b>Box 3. Do you wish to receive a back-up message (in addition to the regular ticket transmissions) for any of these four (4) Ticket Types <u>After Business Hours</u>? Check "Yes" or "No" in the boxes.</b>					
Emergency	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Dig-Up	<input type="checkbox"/> Yes	<input type="checkbox"/> No
No Response	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Non Compliance	<input type="checkbox"/> Yes	<input type="checkbox"/> No

<b>Box 4. How would you like to receive the back-up messages for the ticket types selected in # 3 for <u>After Business Hours</u>? (Choose One):</b>					
<input type="checkbox"/> Text Message:	Phone # :		Carrier:		
<input type="checkbox"/> Email (Enter One Email Address):					
<input type="checkbox"/> Automated Phone Call:	Phone #:				
	Alt #:				
<input type="checkbox"/> Manual Phone Call. <i>I understand there will be a surcharge of \$2.50 Per Manual Call.</i>	Phone #:				
	Alt #:				

**Missouri One Call System, Inc.**  
**General Membership Agreement**

WHEREAS, Missouri One Call System, Inc., (hereinafter called "Corporation"), a Missouri non-profit corporation, has been formed in an effort to reduce damage to the underground facilities of its members through the establishment of a statewide notification system to facilitate the receipt and transmittal of information to and from persons, firms, corporations, municipalities, and other entities intending excavation activities, including but not limited to: backfilling, ditching, drilling, well drilling, auguring, boring, tunneling, scraping, cable or pipe plowing, plowing-in, pulling-in, ripping, driving, demolition, or otherwise disturbing the subsurface of the earth, which activities might interfere with or damage the underground facilities of the members of Corporation who have facilities in the area of the proposed activities; and,

WHEREAS, the undersigned represents that it has underground facilities located within the state of Missouri and is otherwise eligible to be a general member of Corporation; and,

WHEREAS, the undersigned, in accordance with RSMo Chapter 319.015-319.050 makes application.

NOW, THEREFORE, in consideration of the mutual covenants, agreements, and benefits to be gained by membership in Corporation, the undersigned hereby applies for admission as a general member of Corporation, and in connection therewith covenants and agrees to be bound as follows:

1. The member agrees to abide by and accept the By-Laws of the Corporation and to be bound thereby in its participation as a member of Corporation.
2. The member agrees to adhere to the requirements of the Member Operating Specifications.
3. The member agrees to advertise, promote and educate its personnel and its contractors about the "One Call" program, as appropriate, through whatever means are available and practical to the member.
4. The member hereby agrees and promises to pay promptly and fully the fees prescribed by the Board of Directors of Corporation pursuant to the By-Laws of Corporation.

---

**Company name**

---

**Representative name & title**

---

**Signature**

---

**Address:**

---

**City, State & Zip**

---

Do not complete below this line.

**ACCEPTANCE**

**The above Application for General membership in Missouri One Call System, Inc., is hereby accepted this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.**

**MISSOURI ONE CALL SYSTEM, INC.**

---

**Signature of Board Secretary**

**Please submit to:  
Missouri One Call System, Inc.  
824 Weathered Rock Road  
Jefferson City, Missouri 65101**

(Forms cannot be altered)

