



2010-2011 ARCHIPELAGO GHLCMP SERVICES AGREEMENT & REGISTRATION FORM

Vessel Name: _____ VRN: _____
Vessel E-mail: _____
Sat/Autotel #: (____) _____ Cellular #: (____) _____

LICENCE OWNER INFORMATION:

Name: _____
Address: _____
Postal Code: _____ Phone: (____) _____
Cellular: (____) _____ Fax: (____) _____
Email: _____

LESSEE INFORMATION:

Name: _____
Address: _____
Postal Code: _____ Phone: (____) _____
Cellular: (____) _____ Fax: (____) _____
Email: _____

Licence Owner Certification:

I hereby certify that I am the licence holder (owner), or authorized signatory for the licence holder (owner). I further certify that I will accept the Standard Terms and Conditions, Groundfish Hook and Line Catch Monitoring Program, that I have received and accepted the MICROSOFT end user licence agreement and will be personally responsible for payment of all fees for the vessel and licence identified above.*

Print Name of Licence Owner

Signature of Licence Owner

Date

GENERAL SERVICE AND BILLING INFORMATION:

Billing e-mail Address: _____

Billing Contact: Name: _____ Phone: (____) _____ Fax: (____) _____

Billing Address: Street Address: _____ City: _____ Postal Code: _____

Fishing Logbook: I will pick up my logbook from one of your offices Mail it to the: Licence owner or Lessee

Electronic Monitoring Equipment: I will: Own Rent Use Another Service Provider

I would like my Audit and QSR delivered by: Email : _____ or Fax: (____) _____

I would like my invoices delivered by: Email : _____ or Fax: (____) _____

AUTHORIZATION TO CHARGE TO CREDIT CARD:

I hereby request and authorize Archipelago Marine Research Ltd. to charge to the credit card identified below:

ADMINISTRATION FEE (\$975 + APPLICABLE TAXES)

ALL OTHER DMP/MONITORING SERVICE FEES

Name of Cardholder: _____

Card #: _____

Card Expiry Date: _____

Card Type: Visa MasterCard

Cardholder Signature: _____

Current Date: _____

AMR USE ONLY

Amount Paid: \$975.00 + Applicable Taxes

By: Cash () Credit Card () Money Order () Cheque () Debit Card – in person only ()

Authorization #: _____ Received by: _____ Date: _____ Billings Database Update:

Equipment Status Update: Client Type/Price Level Update: Vessel Distribution List: Enter Invoice: Portal Update:

ALTERNATIVE METHODS OF PAYMENT ACCEPTED FOR ADMINISTRATION FEE:

The Administration Fee is payable by credit card, debit card, cheque, cash or money order at the following locations. Office hours may vary; please contact each location for hours of operation:

Victoria

525 Head Street V9A 5S1

Phone: 1-888-383-4535

Fax: (250) 383-0103

Prince Rupert

#14 – 342 Third Ave. W.

V8J 1L5

(250) 627-1167

Port Hardy

#203 – 8755 Granville St.

V0N 2P0

(250) 949-7160

Ucluelet (no debit)

1672 Cedar Road

V0R 3A0

(250) 726-2724

***Documents are available at www.archipelago.ca and the locations listed above. You may request them to be e-mailed or faxed by calling 1-888-383-4535.**