



**SOUTH CAROLINA 811
MEMBERSHIP INFORMATION UPDATE**

Name of Organization: _____

Name of Representative: _____

Representative's Email (will be used as login for Exactix): _____

Alternate Representative's Name & Title: _____

Alt Representative's Email (will be used as login for Exactix): _____

Organization's Address: _____

Telephone #: _____ Fax #: _____

Onsite Locator Contact: _____

Onsite Locator email address/Telephone #: _____

Damage Contact: _____

Damage Contact email address/Telephone #: _____

Facility Information

- | | | | |
|--|-----------------------------------|--|--|
| <input type="radio"/> Cable Television | <input type="radio"/> Electric | <input type="radio"/> Telecommunications | <input type="radio"/> Other (Identify) _____ |
| <input type="radio"/> Gas | <input type="radio"/> Natural Gas | <input type="radio"/> Telephone | |
| <input type="radio"/> Propane Gas | <input type="radio"/> Petroleum | <input type="radio"/> Sewer | |
| <input type="radio"/> Traffic | <input type="radio"/> Storm Water | <input type="radio"/> Water | |

Billing Information

Primary Billing Contact: _____

Primary Billing email address/Telephone #: _____

Alternate Billing Contact: _____

Alternate Billing email address/Telephone #: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Communication Receiving Information (Where Transmissions Will Be Received)

Receiving Device: Email *Text Message (*Additional fees may apply)

Email Address for receiving locates: _____

Email address for receiving EMERGENCY locates: _____

Phone number for receiving locate texts: _____

Phone number for receiving EMERGENCY locate texts: _____

GIS Information

Authorized Contact Person for GIS Updates: _____

GIS Contact's Email/Telephone #: _____

(Complete page 2 for Emergency information)

Emergency Information

Please indicate your company **Normal** business hours for each day of the week (Example: 8:00 am – 5:00 pm)

M - _____ T- _____ W- _____ T - _____ F - _____ Sat - _____ S - _____

Please indicate the **Hours** for each day of the week when you would like to be notified about emergency locates outside normal business hours (Example: 5:00 pm – 8:00 am)

M - _____ T- _____ W- _____ T - _____ F - _____ Sat - _____ S - _____

Holiday

Please check the days your office will be closed

New Year's Day ___ MLK Jr. Day ___ Presidents Day ** ___ Confederate Memorial Day ** ___

Memorial Day ___ Independence Day ___ Labor Day ___ Veterans' Day ___

Thanksgiving Day ___ Day after Thanksgiving ___ Christmas Eve ___

Christmas Day ___ Day after Christmas** ___

**This is a legal holiday. SC811 will be open, but the 3 full working day notice will be calculated from the next business day

Select how you would like to receive your after-hours notices: (Select only one option)

1. Email address for after hours and weekend notices: _____

2. Phone number for after hours and weekend notices: _____

3. Text Phone # and Email for after hours and weekend notices: _____

Contact Name: _____

Contact #: _____

Approximate mileage of underground facilities: _____

List of Counties Served:

Helpful Links

Please visit exactix.sc811.com to create locate notifications and check positive response

Please visit <http://sc811.com/> for copies of our law and frequently asked questions regarding membership.

To access our resources including our video library, please visit <https://sc811.com/resources/video-library/>

If you would like to schedule training, visit <https://sc811.com/education-outreach/>

If you would like to report a violation, visit <https://sc811.com/about/enforcement/>

For Frequently Asked Questions please visit <https://sc811.com/faqs/>

AUTHORIZATION TO TRANSMIT LOCATE INFORMATION

South Carolina 811, Inc. ("SC811") provides member utility owner/operators with excavation information that is reported to SC811 in the form of a locate request. This document contains the terms and conditions upon which SC811 will provide such information to the member utility owner/operator as follows.

1. Service Area. A buffer distance specified by the member utility owner/operator. When an excavation is reported to SC811 that is within 50 to 250 feet of a member utility owner/operators' service area, a locate request will be transmitted to those member utility owner/operators, it depends on with site marking tool was used.

2. Locate Request Delivery. SC811 will deliver locate request information by the mode you specify in writing or on the "Membership Application". When a locate request is sent by SC811, it enters an information processing system outside the control of SC811. SC811 SHALL NOT BE LIABLE FOR ANY LOCATE REQUEST MESSAGES THAT FAIL TO REACH YOU. In addition, SC811 shall not be liable for any failure to send a message where such failure results from a cause beyond SC811's reasonable control. This includes, without limitation, any equipment, communications, or power failure.

3. Audit Reports. At no additional charge, SC811 will deliver an Audit Report by the same mode specified in writing or on the "Membership Application". The report will be transmitted daily at approximately midnight. This report lists the locate request number of each locate request messages that was sent to you the day before. If you did not receive a locate request number listed on the audit report, then you may notify us that you need the locate request re-transmitted. This report will take place regardless of whether you did or did not receive any messages for the day before.

4. Messages. At no additional charge to you, SC811 may send out informative Messages by the same mode specified in writing or on the "Membership Application". These messages are generally only sent out near holidays or any member information changes and

will be sent between the hours of 7:00 am and 5:00 pm Monday through Friday. The messages will contain information such as, but not limited to, important SC811 system updates, holiday reminders or SC811 events.

5. Modes of Delivery - The available modes in which SC811 can deliver locate request information to you are as follows: (a) **EMAIL** – Address provided by your company; (b) **TEXT MESSAGE** - Cellular Phone number provided by your company and email of cell phone.

6. Normal Delivery - Normal Delivery shall mean the Email address you instruct us to send your locate requests to on the “Membership Application” or in writing.

7. Text Message Delivery Restrictions. Text messages are limited to a minimum number of characters; therefore, only partial locate request information can be sent by text message and is not a legal or binding document. Therefore, you are required to receive a copy of the complete locate request information by Normal Delivery. Only Emergency locate information will be sent by Text Message. When supplied by the excavator, the following locate request field information will be included in the text message: **Format of the text message:**

[Number] [Type] - [Street] NR [Intersection] in [Place] ([County] Cty) - [Site Contact Name] – [Site Contact Phone Number].

8. Emergency Message Delivery. If a member would like to utilize the after-hours emergency option, they will be required to provide SC811 with a contact phone number, email, and/or text number for your company. We will contact the phone number, email or text message provided if an emergency locate request is reported to SC811 between the hours of 5:30 pm and 7:30 am, Monday through Friday, 24 hours a day on weekends and SC811 observed holidays or other days you may need. In addition to this call, you will also be sent a copy of the emergency locate request by Normal Delivery.

9. Change of Delivery. Any changes that you wish to make to the mode or time in which you receive your locate request information must be submitted to jason.nelson@sc811.com

By printing, signing, or otherwise entering your name electronically on this document, you authorize us to use your electronic signature in lieu of a handwritten signature. You agree that your electronic signature will be enforceable as and to the full extent of a hand-written signature as an original handwritten signature for enforcement/enforceability of this document containing the electronic signature(s) whether in court (state or federal), arbitration, or otherwise, you will not raise any defenses or invoke regulatory or statutory claims attempting to invalidate the enforceability of this document to which the electronic signature is affixed.

Please print or type:

By: _____

Title: _____

Company: _____

Signature: _____

Date: _____