



Facility Owner/Operator Membership

General

This document contains information on becoming a facility owner/operator member of the MISS DIG 811 system. Once completed and returned to MISS DIG 811, along with relevant supporting documents, MISS DIG 811 will be able to establish you as a member and you will begin receiving notices (also known as tickets) when excavators and homeowners are working near your underground lines.

If, while completing this document, you have any questions, please contact the MISS DIG 811 Member Services Department at membersupport@missdig811.org or (800) 482-7161.

Do You Own or Operate Underground Facilities?

I.e., Fiber, irrigation, drains, or pipelines

If you or your organization owns/operates underground facilities, please complete this form.

If you or your organization does not own/operate underground facilities, please do not complete this form; you do not need this type of membership. Please consider one of our associate membership options.

What Does It Mean to Be a Member?

When you become a member of the MISS DIG 811 system, we will create a unique identifying code, referred to as a station code, for each facility type you own. Each station code will contain information on ticket transmission settings, summary reports, contacts, and a map of where your facilities are located so that you receive tickets when excavation is occurring nearby (this is known as your “area of interest”). Once you receive a dig ticket, you or your locating company must mark the approximate location of your facility in line with the standard marking guidelines and post to Positive Response within the time allowed under PA 174. The time by which the ticket needs to be responded to is provided on each notice as the legal start date and time. Information on positing to Positive Response and marking guidelines can be found on the MISS DIG 811 webpage resources.missdig811.org.

Member Contact Information

This must be the contact information for the member, not a third-party locator. If you are using a locator, please provide that information in the next section.

Member Name _____

Corporate Address (address used for billing):

Address _____ City _____ State _____ Zip _____

Contact Person _____

Email _____ Phone _____



Facility Owner/Operator Membership

Stations

Stations represent your facilities. There will be a minimum of one station for each facility you have underground. If you desire to break a facility up into multiple station codes, please let the Member Services Department know. Additionally, if you require more than four facilities, or require more than four station codes, email us or provide a supplemental sheet of additional stations. A list of all facility types available can be found at resources.missdig811.org.

Station 1

Facility Type _____

Physical Address

Please complete if different from the corporate address on original paperwork.

Address _____ City _____ State _____ Zip _____

Ticket Notification Settings

Every ticket intersecting with this station's AOI will be sent in the selected format(s).

- PDF (electing PDF will eliminate the ticket data in the body of the email)
- GML
- XML
- GIF

Summary Reports

Summary Reports are end-of-day audits. More than one email can be provided.

Contacts

Member Contact (information will appear on the ticket for excavator use)

Full Name _____ Email _____

Phone _____ Emergency Phone _____

Member IT Contact (internal use only; does not need to be an IT employee)

Full Name _____ Email _____

Station 2

Facility Type _____



Facility Owner/Operator Membership

Physical Address

Please complete if different from the corporate address on original paperwork.

Address _____ City _____ State _____ Zip _____

Ticket Notification Settings

Every ticket intersecting with this station's AOI will be sent in the selected format(s).

- PDF (electing PDF will eliminate the ticket data in the body of the email)
- GML
- XML
- GIF

Summary Reports

Summary Reports are end-of-day audits. More than one email can be provided.

Contacts

Member Contact (information will appear on the ticket for excavator use)

Full Name _____ Email _____

Phone _____ Emergency Phone _____

Member IT Contact (internal use only; does not need to be an IT employee)

Full Name _____ Email _____

Station 3

Facility Type _____

Physical Address

Please complete if different from the corporate address on original paperwork.

Address _____ City _____ State _____ Zip _____

Ticket Notification Settings

Every ticket intersecting with this station's AOI will be sent in the selected format(s).

- PDF (electing PDF will eliminate the ticket data in the body of the email)
- GML
- XML
- GIF

Summary Reports

Summary Reports are end-of-day audits. More than one email can be provided.



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Contacts

Member Contact (information will appear on the ticket for excavator use)

Full Name _____ Email _____

Phone _____ Emergency Phone _____

Member IT Contact (internal use only; does not need to be an IT employee)

Full Name _____ Email _____

Station 4

Facility Type _____

Physical Address

Please complete if different from the corporate address on original paperwork.

Address _____ City _____ State _____ Zip _____

Ticket Notification Settings

Every ticket intersecting with this station's AOI will be sent in the selected format(s).

- PDF (electing PDF will eliminate the ticket data in the body of the email)
- GML
- XML
- GIF

Summary Reports

Summary Reports are end-of-day audits. More than one email can be provided.



Facility Owner/Operator Membership

Contacts

Member Contact (information will appear on the ticket for excavator use)

Full Name _____ Email _____

Phone _____ Emergency Phone _____

Member IT Contact (internal use only; does not need to be an IT employee)

Full Name _____ Email _____

Agent Information

Are you using a third-party locator (e.g., a for-profit locating company, neighboring municipality, or utility authority)?

If yes, please provide the organization's name.

Additionally, you are required to complete an *Agent Letter*, which can be downloaded from the MISS DIG 811 webpage. Subscriptions to a third party are part of your membership and should be included in the below subscription information. If you would like to receive a copy of your tickets, please indicate this both below and on the *Agent Letter*.

Subscriptions

The information provided in this section will determine where MISS DIG 811 sends your tickets. This information is transmitted via email or webhook, and the ticket format assigned at the station will dictate in what format the ticket will be received. Please be aware of storage limits, as tickets cannot be emailed to a full inbox. If you have any questions while filling out this section, please contact the MISS DIG 811 Member Services Department at 800-482-7161.

Additionally, if you require more than four total subscriptions (two email/webhook and two IVR emergency), email us or provide a supplemental sheet of additional subscriptions.

Subscription 1

Are you using a ticket management system? If so, which one?

To which station(s) does this subscription apply?

Delivery Type and Destination

Email _____

Webhook HTTPS URL



Facility Owner/Operator Membership

Secret Key for Webhook

Days of week applied to subscription _____

Timeframe applied to subscription _____

Ticket types applied to this subscription:

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Normal 21-day ticket | <input type="checkbox"/> Damage |
| <input type="checkbox"/> Normal 180-day ticket | <input type="checkbox"/> Design |
| <input type="checkbox"/> Project 21-day ticket | <input type="checkbox"/> Emergency |
| <input type="checkbox"/> Project 180-day ticket | <input type="checkbox"/> Short Notice |
| <input type="checkbox"/> Concerned Caller | |

Subscription 2

Are you using a ticket management system? If so, which one?

To which station(s) does this subscription apply?

Delivery Type and Destination

Email _____

Webhook HTTPS URL

Secret Key for Webhook

Days of week applied to subscription _____

Timeframe applied to subscription _____

Ticket types applied to this subscription:

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Normal 21-day ticket | <input type="checkbox"/> Damage |
| <input type="checkbox"/> Normal 180-day ticket | <input type="checkbox"/> Design |
| <input type="checkbox"/> Project 21-day ticket | <input type="checkbox"/> Emergency |
| <input type="checkbox"/> Project 180-day ticket | <input type="checkbox"/> Short Notice |
| <input type="checkbox"/> Concerned Caller | |



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Subscription 3

Are you using a ticket management system? If so, which one?

To which station(s) does this subscription apply?

Delivery Type and Destination

Email _____

Webhook HTTPS URL

Secret Key for Webhook

Days of week applied to subscription _____

Timeframe applied to subscription _____

Ticket types applied to this subscription:

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Normal 21-day ticket | <input type="checkbox"/> Damage |
| <input type="checkbox"/> Normal 180-day ticket | <input type="checkbox"/> Design |
| <input type="checkbox"/> Project 21-day ticket | <input type="checkbox"/> Emergency |
| <input type="checkbox"/> Project 180-day ticket | <input type="checkbox"/> Short Notice |
| <input type="checkbox"/> Concerned Caller | |

Subscription 4

Are you using a ticket management system? If so, which one?

To which station(s) does this subscription apply?

Delivery Type and Destination

Email _____

Webhook HTTPS URL

Secret Key for Webhook

Days of week applied to subscription _____

Timeframe applied to subscription _____



Facility Owner/Operator Membership

Ticket types applied to this subscription:

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Normal 21-day ticket | <input type="checkbox"/> Damage |
| <input type="checkbox"/> Normal 180-day ticket | <input type="checkbox"/> Design |
| <input type="checkbox"/> Project 21-day ticket | <input type="checkbox"/> Emergency |
| <input type="checkbox"/> Project 180-day ticket | <input type="checkbox"/> Short Notice |
| <input type="checkbox"/> Concerned Caller | |

Check List

Please use the following checklist to make sure all of your information is complete before returning it to MISS DIG 811 by email (membersupport@missdig811.org) or mail (3212 Sjoquist Dr. Gladstone, Michigan 49837).

1. Completed *Facility Owner/Operator Membership* (this form)
2. Carefully read the *Membership Agreement with Confidentiality Provisions, Master Rules and Procedures*, and the *Manning Sheet*
3. *Agent Letter* (if you are using a third-party locator; this document is not required if you're not using an outside company to handle any of your MISS DIG 811 responsibilities)

Thank you for submitting the necessary paperwork to establish your unique stations on the MISS DIG 811 System. Our Member Services Department will create your stations and subscriptions based on the information provided. Once complete, we will send you an email with information on our user accounts to access the system. The team will contact you if we have any questions. However, if you would like to get a hold of us, we can be reached at (800) 482-7161.

Legal Statement Regarding Membership

MISS DIG System, Inc. ("MISS DIG") IS WILLING TO ADMIT YOU AS A MEMBER OF THE MISS DIG SYSTEM (REFERENCED BELOW AS "YOU" OR "YOUR") ONLY ON THE CONDITION THAT YOU ACCEPT ALL OF THE TERMS OF THE MISS DIG MEMBERSHIP AGREEMENT ("MEMBERSHIP AGREEMENT") AS WELL AS ANY AMENDMENTS, REVISIONS OR REPLACEMENT MEMBERSHIP AGREEMENT. READ THE TERMS AND CONDITIONS OF THE MEMBERSHIP AGREEMENT FOUND AT <https://www.missdig.org/members/resources.html> CAREFULLY BEFORE ESTABLISHING YOUR MEMBERSHIP. RETURN OF THE MEMBERSHIP SET UP FORM CONSTITUTES ACCEPTANCE OF AND AGREEMENT TO THE TERMS OF THE MEMBERSHIP AGREEMENT, AS CURRENTLY STATED AND AS AMENDED, REVISED OR REPLACED IN THE FUTURE BY THE MISS DIG SYSTEM INC. BOARD OF DIRECTORS, AND IS A LEGAL AND ENFORCEABLE CONTRACT BETWEEN YOU AND MISS DIG. BY SUBMITTING THE SET UP FORM OR OTHERWISE ACCEPTING NOTICES FROM MISS DIG, YOU AGREE TO THE TERMS AND CONDITIONS OF THE MISS DIG MEMBERSHIP AGREEMENT. IF YOU DO NOT AGREE TO THESE TERMS AND CONDITIONS, DO NOT RETURN MEMBERSHIP SETUP FORM. THE TERMS AND CONDITIONS OF THE MEMBERSHIP AGREEMENT, AS CURRENTLY STATED AND AS AMENDED, REVISED OR REPLACED IN THE FUTURE BY THE MISS DIG SYSTEM INC. BOARD OF DIRECTORS, ARE SPECIFICALLY INCORPORATED BY THIS REFERENCE INTO UNLESS SPECIFICALLY AMENDED BY A MUTUALLY EXECUTED Special Membership Agreement or other Writing signed by YOU AND MISS DIG. UNLESS OTHERWISE DEFINED HEREIN, CAPITALIZED TERMS WILL HAVE THE MEANING GIVEN IN THE MEMBERSHIP AGREEMENT AND SUCH CAPITALIZED TERMS MAY BE USED IN THE SINGULAR OR IN THE PLURAL, AS THE CONTEXT REQUIRES.