

**SUBCONTRACTORS
EQUIPMENT FOR HIRE REGISTRATION FORM**

DATE: _____

JOB # _____

ACTIVITY # _____

UNIT # _____

Name of Registered owner: _____

Address: _____

Telephone No: _____ Alternate Contact No: _____

DESCRIPTION OF EQUIPMENT

Type: _____

Make & Model: _____ Year: _____

Licence No: _____ Serial No: _____

Engine Size: _____ Licenced G.V.W.: _____

Attachments: _____

TRUCK SPECIFICATIONS

Single Axle ___ Tandem Axle ___ Pup ___ Belly Dump ___

Make: _____ Model _____ Year: _____

Serial: _____ Net Engine H.P. _____

Licence _____ Attachments _____

LICENCED CAPACITY FORMULA

Licenced G.V.W. _____ kg

Tare Weight _____ kg

Licenced Load _____ kg

Licence Capacity _____ m3
(*1780kg/m3) Scale Slip Attached _____

Note: To work for Emcon Services Inc. you must be registered with the Workers' Compensation Board and have an account in good standing.

WCB # _____ Registered Owner's Signature: - _____

SUBCONTRACTOR RENTAL RATE QUOTATION:

\$ _____ All found rate per hour (including attachments)

\$ _____ Bare Rental (Day, Week or Month if applicable)