

ECRC~SIMEC

Eastern Canada Response Corporation Ltd.
1201-275 Slater Street Ottawa ON K1P 5H9 CANADA
GST/HST # 86821 9130RT, QST # 1022954187



MEMBERSHIP AGREEMENT INSTRUCTIONS

Determine Coverage Needed: Refer to the coverage table to identify the appropriate coverage for your vessel; Select the corresponding contract from the **Contract Templates** section on our website. Registration fee is determined on area of coverage needed. Visit the approved fees section to determine this year's amount: <https://www.ecrc-simec.ca/en/approved-fees/> (*For vessels travelling only within 500km of ECRCs GAR *Form available upon request*)

Complete Contract Template: Fill In: Vessel Name, Call Sign, IMO#, Desired Effective Date (must be **today or a future date, not retroactive**) Coverage term is fixed at **1 year** (non-negotiable); **Expiration date** is: *Effective Date + 1 year - 1 day*.

Ship Owner Information: Contract must be issued in the name of the **registered ship owner** (ship owning company); Include address, primary phone # and email for correspondence; The contract can be in the care of an agent, manager or operator (plan holder); Contact information (Email & Phone #) is mandatory.

Person Authorized to Implement Arrangement: *Contact that will activate the appropriate Response Organization (ECRC, ALERT or PTMS) in the event of an oil spill. (This contact information usually matches the information in the Transport Canada Declaration form).* Must be a person or title authorized to activate and sign off on response plans/logistics; Provide 24/7 contact phone numbers (no Telex/Inmarsat); Use Appendix to list more authorized contacts if applicable.

Final Steps/Acknowledgments: Fill in all required fields + sign the bottom right signature pane. **Incomplete or Unsigned contracts will result in processing delays.** Complete & submit tax form if necessary. Email all completed documents to: contracts@ecrc-simec.ca Once processed, a temporary coverage will be issued (serves as invoice).

Payment: Pay Registration Fee + applicable taxes via EFT. **(Temporary coverage will provide the full fee + banking information)** **CLIENTS ARE RESPONSIBLE FOR ALL BANK CHARGES. INCLUDE VESSEL NAME OR CONTRACT NUMBER IN THE PAYMENT DETAILS. PAYMENT MUST BE MADE WITHIN 5 BUSINESS DAYS OF THE CONTRACT'S EFFECTIVE DATE.** Send remittance slips to: accounting@ecrc-simec.ca