

-M.P.U.L.S.-

Midwest Professional Utility Locating Services

Date: _____

CUSTOMER INFORMATION

Company Name: _____

Authorized Representative: _____

Billing Address: _____

City, State, Zip: _____

Attention: _____ Phone #: _____

Fax #: _____ E-mail: _____

Customer PO # (if applicable): _____

Customer Project # (if applicable): _____

NOTE: PAYMENT DUE 15 DAYS FROM INVOICE DATE

BILLING RATE: \$ _____/hour

Choose One: _____ Invoice Customer _____ Payment on Site

RELEASE OF LIABILITY AND INDEMNIFICATION

Customer understands that this agreement is for a private locate opinion. Reasonable efforts are expected to identify the underground facilities for which Customer has contracted. Customer knowingly and voluntarily releases Midwest Professional Utility Locating Services (M.P.U.L.S.) and agrees to indemnify and hold harmless Midwest Professional Utility Locating Services (M.P.U.L.S.), its agents, officers, directors, assigns, employees and successors, from any and all losses, claims, damages, liabilities, actions and expenses, (including reasonable attorneys fees) to any private or public lines / facilities located or not located.

Authorized Customer Signature: _____ Date: _____

Printed Name and Title: _____

Signature of M.P.U.L.S. Rep: _____ Date: _____

Printed Name and Title: _____

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