



2018 Hired Equipment Registration Form

Name of Registered Owner/Company:		
Contact Name:		
Address:	Postal Code:	
Phone:	Fax:	Email:

Equipment Type	Year	Make & Model	Capacity	GVW	Hourly Rate	Daily Rate
				kg	\$	\$
				kg	\$	\$
				kg	\$	\$
				kg	\$	\$
				kg	\$	\$
				kg	\$	\$
				kg	\$	\$

Reference Contact Name:	
Phone:	Description of Work:

Business License # WCB # Comprehensive General Liability Insurance \$5M Vehicle Insurance \$2M

Peace River Regional District
 Box 810, 1981 Alaska Avenue, Dawson Creek, BC V1G 4H8
 Toll Free: 1-800-670-7773
 Phone: 250-784-3200
 Fax: 250-784-3201