



Photo credit: Infinity Engineering

DEH CHO BRIDGE TOLL REMITTANCE AGREEMENT

IMPORTANT INFORMATION FOR USERS

- (1) Part 1 and Part 3 of the *Deh Cho Bridge* Toll Remittance Agreement must be completed in full. Part 2 lists the terms and conditions.
- (2) The completed agreement must be submitted by email, by mail or in person. Email submissions must be sent to toll_admin@gov.nt.ca. Mail and personal deliveries must be received at the following address:

Remittance Agreement Finance Office
Department of Transportation - South Slave Region
Suite 201 - 76 Capital Drive
Hay River, NT
X0E 1G2
- (3) The agreement is conditional upon a successful credit review with the Department of Finance, GNWT. Results of the credit review will be communicated to the user in writing by the Registrar.
- (4) If the agreement is approved, the Registrar will notify the user by returning the agreement to the user with the Registrar's signature.
- (5) If the agreement is not approved, the Registrar will notify the individual by returning the agreement with the Registrar's written explanation.
- (6) Every party to a remittance agreement must register and install an approved transponder in each vehicle under their control that will be crossing the Bridge. The authorized transponder provider is International Road Dynamics (IRD). Transponders must be purchased or leased from IRD. Each transponder must be registered prior to use on the Bridge. IRD can be contacted by phone at 1-866-903-0333 or by email at transponder.admin@irdinc.com.
- (7) All electronic documents required for remittance procedures are available at the Department of Transportation website: www.tolling.dot.gov.nt.ca

Questions about the remittance agreement or general remittance procedures
may be directed to toll_admin@gov.nt.ca or (867) 874-5000.

DEH CHO BRIDGE TOLL REMITTANCE AGREEMENT

BETWEEN THE REGISTRAR OF MOTOR VEHICLES AND _____ (“THE USER”)

PLEASE PRINT CLEARLY

PART 1 – USER INFORMATION

SECTION A:

Legal Name (“User”):

Registered Office Postal Address:

City or Town:

Territory/Province:

Postal Code:

Registry Number:

NSC Number:

Name of Owner / Director:

Email Address of Owner / Director:

Postal Address of Owner / Director:

City or Town:

Territory/Province:

Postal Code:

SECTION B:

Operating Name of Business:

Business Location:

Postal Address:

City or Town:

Territory/Province:

Postal Code:

SECTION C:

Name of Contact Person:

Title of Contact Person:

Telephone Numbers:

home number:

work number:

cell number:

Fax Number:

Email Address:

PART 2 – IN CONSIDERATION FOR BEING PERMITTED TO USE THE *DEH CHO BRIDGE*, THE USER AGREES TO THE FOLLOWING TERMS AND CONDITIONS:

- (1) The user agrees to accurately report and remit toll payments for every northbound crossing of the Bridge made by each vehicle under the user's control, as per the *Deh Cho Bridge Regulations*.
- (2) The user agrees to accurately report and remit toll payments on or before the 28th day of the month for all northbound crossings made in the previous calendar month by vehicles under the user's control.
- (3) The user agrees to make all payments by cheque. Cheques must be payable to the Government of the Northwest Territories and sent to the following address:

Remittance Agreement Finance Office
Department of Transportation - South Slave Region
Suite 201 - 76 Capital Drive
Hay River, NT
X0E 1G2
- (4) The user agrees to accurately report all northbound crossings on the website <www.tolling.dot.gov.nt.ca>.
- (5) The user agrees to submit a report marked "NIL" even if no crossings are made by any vehicles under the user's control in a given month.
- (6) The user agrees to purchase or lease an approved transponder for each vehicle under the user's control that will be crossing the Bridge. The authorized transponder provider is International Road Dynamics (IRD). Transponders must be purchased or leased from IRD. Each transponder must be registered prior to use to on the Bridge. IRD can be contacted by phone at 1-866-903-0333 or by email at <transponder.admin@irdinc.com>.
- (7) The user agrees to register and install an approved transponder in each vehicle under the user's control that will be crossing the Bridge. The user agrees to contact and make appropriate arrangements with the transponder provider prior to moving a transponder to a different vehicle.
- (8) The user agrees to make available any document or thing for the purposes of verifying compliance with the reporting and remittance obligations under the *Deh Cho Bridge Act* and regulations as well as the terms and conditions of this agreement.
- (9) The Registrar reserves the right to require for any reason the user to purchase single-use toll permits for a period of time for all vehicles under the user's control.
- (10) The remittance agreement must be renewed annually.
- (11) Vehicles registered to contractors, sub-contractors or rental companies are not covered by the terms of this agreement.
- (12) As per paragraph 6(3)(c) of the *Deh Cho Bridge Regulations*, the Registrar may terminate the agreement if "the party to the remittance agreement is not meeting one or more conditions of that agreement."

PART 3 – USER'S SIGNATURE

Name _____

Signature _____

Date (DD-MM-YYYY) _____

PART 4 – REGISTRAR’S DECISION AND SIGNATURE

(Office Use Only)

Approved

Not Approved

Registrar’s Signature _____

Date (DD-MM-YYYY) _____

Comments:

VALIDATION PERIOD:

(Office Use Only)

This agreement commences on (DD-MM-YYYY) _____

The agreement expires on (DD-MM-YYYY) _____

CREDIT CHECK REFERENCE



PLEASE PRINT CLEARLY

COMPANY INFORMATION

LEGAL NAME: _____
OPERATING NAME: _____
ADDRESS: _____

The information provided below will be used by the Government of the Northwest Territories to conduct a credit check.

A credit review is currently being conducted by the Department of Finance, Government of the Northwest Territories. I/we have provided my/our authorization below. Please respond to this request.

BANK REFERENCE

Name _____
Address _____

Account Manager Name _____
Telephone _____
Email _____
Fax _____

I/We hereby authorize the Government of the Northwest Territories to conduct necessary credit inquiries including obtaining credit information about me/us from any credit bureau, any person with whom I/we may have or propose to have financial dealings or any other person in processing this application.

Name: _____ Position: _____

Signature: _____ Dated At: _____

In the Province/Territory of _____ on this _____ day of _____, 20 _____

CREDIT CHECK REFERENCE



PLEASE PRINT CLEARLY

COMPANY INFORMATION

LEGAL NAME:

OPERATING NAME:

ADDRESS:

The information provided below will be used by the Government of the Northwest Territories to conduct a credit check.

A credit review is currently being conducted by the Department of Finance, Government of the Northwest Territories. I/we have provided my/our authorization below. Please respond to this request.

TRADE/SUPPLIER REFERENCE #1

Name

Address

Account Number

Account Manager Name

Telephone

Email

Fax

I/We hereby authorize the Government of the Northwest Territories to conduct necessary credit inquiries including obtaining credit information about me/us from any credit bureau, any person with whom I/we may have or propose to have financial dealings or any other person in processing this application.

Name:

Position:

Signature:

Dated At:

In the Province/Territory of

_____ on this

day of

, 20

CREDIT CHECK REFERENCE



PLEASE PRINT CLEARLY

COMPANY INFORMATION

LEGAL NAME: _____
OPERATING NAME: _____
ADDRESS: _____

The information provided below will be used by the Government of the Northwest Territories to conduct a credit check.

A credit review is currently being conducted by the Department of Finance, Government of the Northwest Territories. I/we have provided my/our authorization below. Please respond to this request.

TRADE/SUPPLIER REFERENCE #2

Name _____
Address _____

Account Number _____
Account Manager Name _____
Telephone _____
Email _____
Fax _____

I/We hereby authorize the Government of the Northwest Territories to conduct necessary credit inquiries including obtaining credit information about me/us from any credit bureau, any person with whom I/we may have or propose to have financial dealings or any other person in processing this application.

Name: _____ Position: _____

Signature: _____ Dated At: _____

In the Province/Territory of _____ on this _____ day of _____, 20 _____

CREDIT CHECK REFERENCE



PLEASE PRINT CLEARLY

COMPANY INFORMATION

LEGAL NAME: _____
OPERATING NAME: _____
ADDRESS: _____

The information provided below will be used by the Government of the Northwest Territories to conduct a credit check.

A credit review is currently being conducted by the Department of Finance, Government of the Northwest Territories. I/we have provided my/our authorization below. Please respond to this request.

TRADE/SUPPLIER REFERENCE #3

Name _____
Address _____

Account Number _____
Account Manager Name _____
Telephone _____
Email _____
Fax _____

I/We hereby authorize the Government of the Northwest Territories to conduct necessary credit inquiries including obtaining credit information about me/us from any credit bureau, any person with whom I/we may have or propose to have financial dealings or any other person in processing this application.

Name: _____ Position: _____

Signature: _____ Dated At: _____

In the Province/Territory of _____ on this _____ day of _____, 20 _____