

Toolshark Contract

Organization Information

Organization Name:

Mailing Address:

City:

Province/State:

Postal Code/Zip Code

Contact Information

Contact: Last Name

First Name

Position/Title:

Email Address:

Phone Number: ()

Fax Number: ()

Billing Information

Set Up & Installation Fee: \$ _____ + Taxes

Monthly Fees are payable in quarterly installments as follows:

Monthly Rate: \$ _____ x 3 months = \$ _____ Quarterly Payment + Taxes

(First quarterly payment due at sign up)

***Signature**

Neighboring Organizations

Please give our Organization access to search the following Organizations. (I understand that you must first obtain authorization from them and that this is giving them authorization to search our organization as well.)

Organization Name:

Contact Person:

Phone Number:

Organization Name:

Contact Person:

Phone Number:

Prior to signing your organization up on the toolshark we require your signature acknowledging the following:

- I understand that I am renting, on a subscription basis, the use of the toolshark database and that all present data and subsequent data added to the database is owned in its entirety by Toolshark Enterprises.
- I understand that the data entered under my organization will not be shared with any other organization without my consent.

Organization Signature

Date