

CANADIAN HYDROGRAPHIC SERVICE

APPLICATION FORM

Application to enter into an agreement (copyright licence, memorandum of understanding, letter of permission) to use Canadian Hydrographic Service (CHS) digital or analogue products and/or data and/or product updates (“CHS intellectual property” or “CHS IP”).

General

This application will allow CHS to assess your request and determine the conditions under which an agreement may be issued.

Date of Application: _____

Type of Agreement Under Consideration:

- | | |
|---|--|
| <input type="checkbox"/> DFO Internal Use | <input type="checkbox"/> Direct User Licence Agreement
() commercial entity
() research (non-navigation use) |
| <input type="checkbox"/> Letter of Permission | <input type="checkbox"/> Memorandum of Understanding
() government department
() government Crown corp. (agent of the Crown) |
| <input type="checkbox"/> Site Licence Agreement | <input type="checkbox"/> Value-Added Reseller Agreement
() create hardcopy product for re-sale
() create digital product for re-sale |

Applicant Information

Your Name		
Your Title/ Position:	<input type="checkbox"/> I am a student	
Company or Organization		
Business Address:		
Mailing Address (if different):		
Telephone:		Fax:
E-mail:		
Web Site:		

If business, date established:		
Structure of Business:	() Sole Proprietorship () Business Corporation () Partnership () Gov't Dept. () Gov't Agency* () Crown Corp.* () Other () Non-Profit/Charitable Corporation *Federal Crown agent? (Y/N)	
Incorporated Under the Laws of:	Province/State:	Country:
Date Incorporated:		
Additional Contact:	If there is an additional contact, please add the name here. If you checked "I am a student" you must provide the full name and address of a permanent faculty member:	

CHS Intellectual Property to Be Used

1. Please specify the CHS intellectual property you wish to access/copy/ modify/reproduce. Please list chart numbers, field sheet numbers, tidal data or products, lines of latitude, longitude, etc. to be as precise as possible.

Attached

2. Please state clearly the nature of your business and intended use of the CHS intellectual property. Describe any intended creation of products to be sold commercially or non-commercially, products which will not be sold, and/or published papers, web sites, research activities or other forms of distribution. Please include product edition numbers, if applicable.

Attached

3. If you are creating a product to be sold commercially, what is your Estimated Price for each of your product(s) derived from or including CHS intellectual property?

Name/Type of Product	Estimated Quantity Intended for Distribution	Estimated Wholesale Price	Estimated Retail Price

--	--	--	--

4. Please indicate your target sales or distribution forecast for the term of the licence.

5. What percentage of your product will be comprised of CHS intellectual property? Please describe the method(s) used to establish this proportion (e.g.: number of CHS charts included in the product compared to the total number of licensed charts produced by national hydrographic offices in the product).

6. Please include any additional supporting information that you feel will help us to better assess your application.

7. If you are applying for a site licence, please complete this section. Otherwise proceed to signature page.

Number of workstations applied for: _____

Number of workstations overall in organization: _____

Number of employees who will be using the CHS IP: _____

Number of employees in the organization: _____

Addresses of locations applied for:

If an agent will provide services related to the operation of the site licence, please identify:

Legal Name of Agent:	
Business Address:	

Incorporated Under the Laws of:	Province/State:	Country:
Date Incorporated:		
Telephone:		Fax:
E-mail:		
Web Site:		
Responsibilities of/Services to be Provided by Agent under Site Licence Agreement:		

Declaration

I declare that I have the authority to sign this declaration on behalf of the applicant, and I declare that the information that I have supplied is true and accurate to the best of my knowledge, and that any revisions to the information provided above will be immediately provided in writing to the CHS licensing representative.

Signature: _____ Date: _____

If the applicant is a student, co-signing by a permanent faculty member is required:

Signature of permanent faculty member: _____
 Academic Institution _____
 Name (please print): _____
 Address _____
 Telephone _____
 E-Mail: _____
 Date: _____

Return the completed form to:

Client Services Canadian Hydrographic Service 615 Booth Street Ottawa, ON K1A 0E6 Fax: (613) 996-9053	FOR CHS USE ONLY
---	-------------------------