

RESERVATION SYSTEM REGISTRATION

FSD requires the following information to have you registered on the container reservation system:

Trucking Company: _____

Address: _____

Manager's Name: _____

Company Phone: _____

Company Fax: _____

Web site: _____

E-mail: _____

Manager's User Name: _____

Manager's Password: _____

Each user will have their own user name and password.

User Name	First Name	Last Name	E-Mail	Phone (Direct)	Password

Please e-mail or fax back to FSD OPERATIONS

Fax: (604) 495-1196

E-mail: fsdres@fsd.bc.ca