



Please fill out sign and return to GMPCS via fax, E-mail or mail.

1501 GREEN ROAD, POMPANO BEACH, FL, 33064
 (Ph) 954-973-3100 (Fax) 954 973-4800
 www.gmpcs-us.com support@gmpcs-us.com

Acct: VMS _____

GMPCS TRANSFER AGREEMENT FOR INMARSAT VMS – NMFS SERVICES

By signing below I hereby authorize GMPCS Personal Communications, Inc. to assume airtime service and billing responsibilities from Thrane & Thrane USA for Inmarsat C – NMFS Service for the indicated vessel. I authorize GMPCS to bill my credit card monthly for airtime services at the same rates I have been paying to Thrane & Thrane USA. I understand I will receive an e-mail notice that my monthly bill call details records are available on-line at www.gmpcs-us.com.

___ By checking here, I request a full copy of GMPCS's service agreement which will be mailed to my address below.

CUSTOMER & Vessel INFORMATION :

Individual or Company Name _____

Vessel Name: _____ IMN _____

Address _____

City _____ State _____ Post Code _____

Phone _____ E-Mail _____

Card Number _____ Security Code* _____ Expiration _____ (MM/YY)

Exact Name on Credit Card: _____

Exact Credit Card Billing Address: _____
 (Write same if it is the same as in Part 1)

City _____ State _____ Post Code _____ Country _____

NOTE: GMPCS Does Not Accept
 Third Party Cards. _____

Authorized Signature