

Rental Agreement (Imprinted)

7381-IMP

(Form# CFD-252-PA4)

Product Description

Our excellent Rental Agreement shows itemized charges for the rental or loaner vehicle. Help protect yourself and your vehicle with this quality form.

Product Specifications

- 8-1/2" x 11-3/4"
- 4-part, snap-out carbonless form.
- Available crash imprinted in 1 color only.
- Logo and 4 lines of text can be imprinted on this form.
- Imprint area is approximately 4" wide x 1/2" tall.
- Quantities: Minimum 500 / Incremental 500

Additional Information

Non-Standard Ink Colors: NA

Proof Charge: Up to 3 Free

Plate Charge: NO

Body Printing: Additional Information can be crash imprinted on the form at an additional charge.

Numbering: Yes - Red ink only. Customer must supply the numbering sequence. Numbering must be 6 digits (i.e. 1 will be represented as 000001).

Screens and Gradients: NA

PMS Matching: NA

Bleed: NA

Art Requirements

- High resolution (300dpi) or fully editable vector artwork is required.
- Preferred file formats are InDesign (.indd), Illustrator (.ai or .eps), or Photoshop (.psd).
- If unavailable, artwork can be recreated if one of the following is provided:
 1. Photo/scan of existing artwork
 2. Description of copy and desired layout.

ITEM #7381 FORM #CFD-252-PA4 MADE IN THE U.S.A.

(Imprint Available Here)

RENTAL AGREEMENT

RENTER (PRINT) HOME ADDRESS CITY STATE ZIP CODE DRIVER'S LICENSE NO. STATE EXP. DATE BIRTH DATE SOCIAL SECURITY NO. HOME PHONE LOCAL CONTACT ADDRESS PHONE EMPLOYER ADDRESS CITY STATE ZIP REFERRED BY

REPLACEMENT CAR NO. MAKE-MODEL-YEAR-COLOR LICENSE NUMBER ODOMETER IN ODOMETER OUT MILES DRIVEN DATE AND TIME IN DATE AND TIME OUT MILES ALLOWED DATE AND TIME OUT CHARGEABLE MILES DATE DUE EXPIRATION OF AGREEMENT

DRIVER'S LICENSE NO. STATE EXP. DATE BIRTH DATE SOCIAL SECURITY NO. HOME PHONE LOCAL CONTACT ADDRESS PHONE EMPLOYER ADDRESS CITY STATE ZIP REFERRED BY

RENTAL RATES CHARGES

Gas (Taxable) Sub-Total Sales Tax or Surcharge Gas (Non-Taxable) C/D/W (Non-Taxable) PERSONAL ACCIDENT INSURANCE PERSONAL EFFECTS COVERAGE Less Refund For: Less Deposits Net Amount Due Net Due Renter

WARNING: I have read carefully all driving and use restrictions on the reverse side. I am responsible for all traffic violations and must turn in all summaries upon return of vehicle. I will report all accidents immediately. I have read both sides of this agreement and agree to its terms and conditions. I authorize you to process a credit card over my name. THIS IS YOUR INVOICE-PAYMENT DUE ON RECEIPT

RENTER'S SIGNATURE EXTEND TO ADDITIONAL CASH DEPOSIT DATE INITIALS EXTEND TO ADDITIONAL CASH DEPOSIT DATE INITIALS CHECKED OUT BY: CHECKED IN BY:

ITEM #7381 FORM #CFD-252-PA4 FINAL CHARGES ARE SUBJECT TO AUDIT FRONT

Standard Stock Colors

Part 1	White
Part 2	Canary
Part 3	Pink
Part 4	Goldenrod

Standard Crash-Imprint Ink Colors

Black	Red (PMS 185)
Blue (PMS 293)	Green (PMS 355)

Production Notes (For Internal Use)

Production: 085

- InDesign file created using pre-set templates.
- PDF exported with all fonts outlined.
- Outline all fonts in Illustrator prior to production.

Standard Imprint Header

Standard Imprint City & Phone

RENTAL AGREEMENT

RENTER (PRINT)				REPLACEMENT CAR NO.		ORIG. CAR NO.	
HOME ADDRESS				MAKE-MODEL-YEAR-COLOR		MAKE-MODEL-YEAR-COLOR	
CITY		STATE		ZIP CODE		LICENSE NUMBER	
DRIVER'S LICENSE NO.		STATE		EXP. DATE		ODOMETER IN	
BIRTH DATE		SOCIAL SECURITY NO.		HOME PHONE		ODOMETER OUT	
LOCAL CONTACT				ADDRESS		PHONE	
EMPLOYER				PHONE		MILES DRIVEN	
EMPLOYER'S ADDRESS				MILES ALLOWED		DATE AND TIME IN	
CITY		STATE		ZIP		A.M. P.M.	
REFERRED BY		DATE AND TIME OUT		DATE DUE		EXPIRATION OF AGREEMENT	
I will not under any circumstances surrender the use of the rented vehicle to any person other than those listed below or in Paragraph 6 of the back of this Agreement. Operation of the vehicle by any driver in violation of Paragraph 6 is prohibited. If none, print NONE across this section.		GAS		RENTAL RATES		CHARGES	
		OUT IN		Miles @		\$	
		E E		Hours @		\$	
		1/4 1/4		Days @		\$	
				Weeks @		\$	
		1/2 1/2		Months @		\$	
		3/4 3/4		Total Time and Mileage Charges		\$	
		F F		Gas (Taxable)		\$	
ADDITIONAL RENTER NAME		HOME PHONE NO.		DATE OF BIRTH			
DRIVER'S LICENSE NO.		STATE/COUNTRY		EXPIRATION DATE			
RENTER'S INITIALS		PHYSICAL DAMAGE WAIVER		RENTER'S INITIALS		PHYSICAL DAMAGE WAIVER (NOT INSURANCE)	
DECLINES		RATE \$ _____ PER DAY \$ _____ PER WEEK		ACCEPTS		\$	
X		X		X		X	
By my initials, I accept or decline Physical Damage Waiver at the rates listed above. If I decline to purchase the Waiver, I accept full responsibility for loss by collision or Physical damage, regardless of cause up to \$ _____ per occurrence, which may be charged to my credit card shown below. Accepting reduces my responsibility to \$ _____ per occurrence, which may be charged to my credit card shown below.				Sub-Total		\$	
PHYSICAL DAMAGE WAIVER IS NOT INSURANCE				Sales Tax or Surcharge		\$	
						\$	
				Gas (Non-Taxable)		\$	
				C/CDW (Non-Taxable)		\$	
RENTER'S INITIALS		PERSONAL ACCIDENT INSURANCE (P.A.I.)		RENTER'S INITIALS		PERSONAL ACCIDENT INSURANCE	
DECLINES		By my initials, I accept or decline enrollment for Personal Accident Insurance. If I accept, I understand and acknowledge that coverage is at the rates indicated and that I have read the certificate of insurance furnished by dealer prior to rental.		ACCEPTS		\$	
X		RATE \$ _____ PER DAY \$ _____ PER WEEK		X		Sub-Total	
RENTER'S INITIALS		PERSONAL EFFECTS COVERAGE (P.E.C.)		RENTER'S INITIALS		PERSONAL EFFECTS COVERAGE	
DECLINES		By my initials, I accept or decline enrollment for Personal Effects Coverage. If I accept, I understand and acknowledge that coverage is at the rates indicated and that I have read the certificate of insurance furnished by dealer prior to rental.		ACCEPTS		\$	
X		RATE \$ _____ PER DAY \$ _____ PER WEEK		X		Sub-Total	
VEHICLE CONDITION		SPARE JACK O.K.		CUSTOMER INITIALS		Less Refund For:	
OUT						\$	
IN						Total Charge	
RENTAL WILL BE PAID BY						\$	
DRC						Less Deposits	
AMEX						\$	
CB/DINERS						Net Amount Due	
VISA						\$	
M/C						Net Due Renter	
OTHER						\$	
CREDIT AUTH. NO.				DATE		TIME	
AMOUNT				AUTHORIZED BY:		CHECKED OUT BY:	
						CHECKED IN BY:	
WARNING							
<ul style="list-style-type: none"> I have read carefully all driving and use restrictions on the reverse side. I am responsible for all traffic violations and must turn in all summonses upon return of vehicle. I will report all accidents immediately. 							
I have read both sides of this agreement and agree to its terms and conditions. I authorize you to process a credit card voucher, if any, in my name.							
THIS IS YOUR INVOICE-PAYMENT DUE ON RECEIPT							
X _____ RENTER'S SIGNATURE							
EXTEND TO		ADDITIONAL CASH DEPOSIT		DATE		INITIALS	
		\$					
EXTEND TO		ADDITIONAL CASH DEPOSIT		DATE		INITIALS	
		\$					