## **HEAVY EQUIPMENT RENTAL AGREEMENT**

	Today's Date:
	Rental Date & Time:
<b>PENINSULA</b>	Return Date & Time:
AGGREGATES + NURSERY + EQUIPMENT	Operator Name:
<b>360-642-7977</b> PENINSULALANDSCAPESUPPLY.COM	Operator Phone:
	Email:
Business Name:	
Job Address:	
Equipment:	
Attachment(s):	
Reservation fee: Numb	er of days for rental: RATE:
<u>This se</u>	ction must be filled out completely
Card #:	Expiration:
CVV:Billi	ng Zip:
Driver's License #:	

<u>OFFICIAL USE ONLY</u>		
Meter hour OUT:	Meter hour IN:	
Meter hour USED:	_ Meter hour OVERAGE:	

\*Credit card information will not be sold or shared with any other entity. All rentals are subject to a \$100 reservation fee, which will be applied to the first day's rental costs, or refunded if the reservation is canceled more than 72 hours in advance. If a reservation is canceled less than 72 hours in advance, the fee will not be refunded. On the rental start date, the card will be charged the first day's rent and this amount will be applied to the final invoice. Upon return of the equipment, final charges will be tallied and the card above will be charged the full amount owed.

\*There are no refunds if equipment is returned early, except if equipment is returned early due to mechanical issues.

SIGNATURE: X	
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