

The Healthcare Store

944 Melbourne Road
Hurst, TX 76053
(817) 589-1110, (800) 789-9192
Fax (817) 595-1984

RENTAL CONTRACT

I, the undersigned, agree to the following term and conditions:

_____ I. Customer is agreeing to rent the equipment described below and make timely payments to The Healthcare Store, Inc. until said equipment is returned.

_____ II. Customer agrees to return said equipment on or before the due date stated below. In case of late return, customer agrees to extended rental fees.

_____ III. Customer acknowledges that The Healthcare Store, Inc. does not provide invoices or statements, and the customer acknowledges responsibility for insuring that rental payments are made promptly at the beginning of each rental period.

_____ IV. Customer accepts ultimate responsibility for all payments to The Healthcare Store, Inc., regardless of any third-party billing.

_____ V. Customer agrees not to move or relocate from address provided without prior notification of new address to The Healthcare Store, Inc.

_____ VI. Customer agrees not to attempt any repairs and to notify The Healthcare Store, Inc. in case any service issues occur during the rental period.

_____ VII. Customer agrees to the value of said rental equipment and agrees to compensate The Healthcare Store, Inc. if the equipment is lost, stolen or damaged beyond repair. Payment will be due immediately.

_____ VIII. Customer agrees to use rented equipment in the manner for which it was intended. Customer specifically agrees to indemnify and hold harmless The Healthcare Store, Inc. from any and all claims of loss, property damages and/or bodily injury (including death) resulting from the use, operation and possession of said equipment to others and themselves.

<u>EQUIPMENT DESCRIPTION</u>	<u>SERIAL #</u>	<u>RATE</u>	<u>VALUE</u>
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Customer Name: _____ Signature: _____

Responsible Party: _____ Signature: _____

Phone #: _____ Cell/Work #: _____ Nearest Relative's #: _____

DUE DATE _____ **Invoice#** _____ **Sales Representative:** _____