



MJ Equipment Rental, LLC
 N384 County Rd. LL
 Cedar Grove, WI 53013
 Office (920) 668-8484
 Fax (920) 668-8434

CONTRACT #

Lessor: MJ EQUIPMENT RENTAL, LLC		EMERGENCY CONTACTS: Cedar Grove Location: #262-613-0889 (Mike) Oostburg Location: #920-980-5370 (Randy)		
CUSTOMER NAME (Lessee) :		TAX EXEMPT? If, yes please send signed tax exemption form		
COMPANY NAME & ADDRESS:		DELIVER TO:		
PHONE#	CELL#	FAX/E-MAIL:		
INSURANCE CO:		AGENT:		PHONE:
LESSOR DOES NOT PROVIDE INSURANCE COVERAGE FOR LESSEE: For Business's; we require a Certificate of Liability Insurance naming MJ Equipment Rental LLC as Additional Insured, and Evidence of Property Insurance, listing value of leased equipment and naming MJ Equipment Rental LLC as Lessor of Leased Equipment. PLEASE NOTE: For individuals that cannot provide insurance coverage, additional fee may apply, Lessee is responsible for Liability coverage and any damage incurred to equipment during rental. Further details are provided on the reverse hereof "Terms & conditions of contract".				
Reserved Start Date:	Time:	DAILY RATE (24 Hrs.)	WEEKLY RATE	MONTHLY RATE
Estimated Return Date:	Time:	\$ ____ Hrs. on meter	7 Days ____ Hrs. meter	4 weeks - no meter
		\$	\$	\$

TERMS OF RENTAL: Your rental will continue until notified or equipment is returned to the proper yard. We cannot extend a refund due to inclement weather. Weekends are considered rental days; including Sundays. Your rental is also calculated by an hour meter if indicated; if you exceed your allowed meter hours for the time frame rented; additional charges may apply. Equipment must be returned clean, and in the same condition as it left, a cleaning fee of \$50.00 or more may apply. For The Record - Equipment photos and a detailed check list is performed prior to all equipment leaving Lessor's yards.

DESCRIPTION OF RENTAL	RATE	QUANTITY	TOTAL
RENTAL ITEM -			
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ATTACHMENTS -			
FREIGHT (95 per hour or 85 minimum)			
RE-FUEL CHARGES PER GALLON			
SAFETY HARNESS (\$6.00 ea.)			
ADDITIONAL HOURS : \$25 X ____ Extra Hrs. = ____			
*****Operators of boom lifts ONLY are required by OSHA to wear safety harnesses approved by ANSI for aerial lift work. If you will be providing your own harnesses you can sign off below stating this. Otherwise you will be required to rent a harness for the operator(s) when renting any boom lift. Signature: _____			Est. Sub total
			SALES TAX
			TOTAL DUE

CUSTOMERS PAYMENT TERMS: CHECK CASH CREDIT CARD

All rentals are reserved w/credit card, unless otherwise agreed upon.

CREDIT CARD _____ EXP. ____ / ____ CODE _____

NAME: as it appears on credit card (print) _____

C/C Address _____ City/Town _____ ZIPCODE _____

I, (Lessee) _____ Print _____ Date: _____ have read, agree and understand all aspects of the contract presented. Terms and conditions of this Contract are continued on the next page, any different or additional terms, whether written or otherwise, are hereby objected to and shall have no legal force or applicability whatsoever. By signing this contract, customer agrees to the terms and conditions set forth on the face and following page hereof