

Motor Vehicle Rental Agreement

Company name:				
Address:				
Phone:				
Vehicle Reg No		Area of use:	km radius from rental location	
Make:		Date out:	Time: am	
Model:		Due in :	Time: am	
Year:		Actual time in:	am	
Colour:		Extra Hours:		
Rental location:		Km Out:		
Return location:		Km in:		
Damage/Loss liability	\$	Total km:		
Credit card:		Less Allowance:		
Expiry date:		Extra Kms :		
(card holders authorisation) Authorisation No		Hirer responsible for all single		
		Vehicle damage	Accept	Decline
		Personal Accident Insurance	<input type="checkbox"/>	<input type="checkbox"/>
		Liability Waiver	<input type="checkbox"/>	<input type="checkbox"/>
		Windscreen Waiver	<input type="checkbox"/>	<input type="checkbox"/>
Hirer Full Name:		Deposit	Charges	Extension
Address:			Daily x\$	
DOB:			Weekly x\$	
Licence No			Monthly x\$	
Expires:			Extra hours x\$	
State:			Fuel x\$	
Local Address:			Relocation fee x\$	
Phone:			Liability Waiver x\$	
			W/Scrn Waiver	
Joint Hirer Full name:				
Address:				
DOB:				