



# MAGTROL

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## Magtrol Incorporated Equipment Rental Agreement

The undersigned agrees to the terms and conditions of the Magtrol Rental Agreement and guarantees payment for the rental period, inbound and outbound freight, and any damage to the equipment during the rental period and shipping. The need for normal calibration upon return is NOT considered damage.

### EQUIPMENT TO BE RENTED

	List Price	Weekly Rental
<input type="checkbox"/> Dynamometer (model) _____	\$ _____	\$ _____
<input type="checkbox"/> DSP6001 Dynamometer Controller	\$ _____	\$ _____
<input type="checkbox"/> 6510e Single-Phase Power Analyzer	\$ _____	\$ _____
<input type="checkbox"/> 6530 Three-Phase Power Analyzer	\$ _____	\$ _____

### STANDARD RENTAL RATE

Equipment rental rate is 5% of published list price, per week of use. Rental period is determined by dates on shipping documents.

### EQUIPMENT PURCHASE COST RECOVERY

New equipment purchased from Magtrol within 30 days of the end of the rental program are eligible for 25% of the rental cost to be applied to the purchase. This applies to similar products only (dynamometer rental / dynamometer purchase).

### RENTAL PERIOD

Rentals are limited to 4 weeks unless other arrangements are made. Exceptions must be authorized by Magtrol. *After the 4 week period, the equipment must be returned, or the full purchase price will be applied.*

### CUSTOMER AUTHORIZATION

**Customer:** \_\_\_\_\_ **Contact Phone:** \_\_\_\_\_  
**Contact Name:** \_\_\_\_\_ **Contact Fax:** \_\_\_\_\_

#### Billing Information

Credit Card Type:  Visa  Master Card  
Card Number: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_ / \_\_\_\_\_ 3-Digit Security Code: \_\_\_\_\_  
Name on Card: \_\_\_\_\_  
Credit Card Billing Address: \_\_\_\_\_

#### Rental Period

Ship Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Rental Term: \_\_\_\_\_  
Return By: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

#### Shipping Address

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Customer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Print Name:** \_\_\_\_\_