

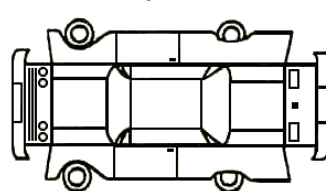
Customer (Print) <b>ZHUO GAO</b>		Phone <b>(732) 662-7882</b>		SS#		Year/Make <b>2004 NISSAN</b>		Vehicle # <b>01085</b>	
Home Address <b>23805 BPO WAY</b>				<b>Piscataway, NJ 08854</b>		Model <b>SENTRA</b>		Color <b>MAROON</b>	
Driver's License # <b>G050879612358475</b>		State <b>NJ</b>		Exp. Date <b>10/23/2007</b>		Date of Birth <b>01/30/1978</b>		VIN # <b>3N1CB51D14L86645</b>	
Insurance Company <b>Geico</b>		Policy No. <b>159874</b>		Agent		Phone		Date/Time Due in AM <b>09/19/2006 18.41 PM</b>	
Employer <b>Sam's Club</b>		Title		How Long		Odometer In <u>1,020</u>		Date/Time Ext. AM PM	
Employer's Address		Phone <b>(732) 445-5882</b>		Supervisor		Out <u>15</u>		Date/Time Ext. AM PM	
Emergency Contact		Address <b>20A ALVA CT EDISON</b>		Phone <b>(987) 555-1212</b>		Miles Driven <u>1,005</u>		Date/Time In AM PM	
No Person other than the Customer or other person authorized by Lessor AND listed below, or authorized by law may drive this Vehicle for any purpose. ABSOLUTELY NO DRIVERS UNDER 21 YEARS OF AGE.									
Additional Driver <b>LAWRENCE JACOBS</b>		Dr. Lic. # <b>J00754466508546</b>		State <b>NJ</b>		Exp. Date <b>08/31/2007</b>		Date of Birth <b>08/16/1954</b>	
Insurance Company		Policy Number		Agent		Phone <b>(732) 388-3036</b>		Date/Time Out AM PM <b>09/18/2006 18.33 PM</b>	
Additional Driver <b>CRISTOBAL VEGA</b>		Dr. Lic. # <b>V22141426409812</b>		State <b>NJ</b>		Exp. Date <b>09/30/2006</b>		Date of Birth <b>09/16/1981</b>	
Insurance Company		Policy Number		Agent		Phone		Excess Miles <u>0</u>	
						Prepaid Rent <b>AmEx</b>		Deposit <b>355.00</b>	
								<b>Rates</b>	
								<b>Charges</b>	
						Hourly 2 15.00 hour		30.00	
						Daily 100 free mls 3 32.99 day		98.97	
						Weekly 700 free mls 2 199.99 week		399.98	
						Excess Miles .25 /mi			
						Net T&M		528.95	
						REG FEE 18 .98 day		17.64	
						COLLISION DAMAGE 17 2.75 day		38.95	
						Personal Accident Cover. 17 1.22 day		14.54	
						Personal Effects Cover. 1 4.44 unit		4.44	
						Safe Trip 17 1.11 day		13.77	
						Additional Driver 36 3.95 day		146.20	
						3/8 Ppd Fuel/Unit#01085 4.88 3.00 gal		14.64	
						Satellite Radio Asset ID#: 500 15.00 unit		15.00	
						PLC dtag fee 1 6.66 unit		6.66	
						Vehicle License Fee 1 2.34 unit		2.34	
						NJ Domestic Security Tax 17 2.00 day		35.00	
						NJ SALES TAX 6.000 %		45.94	
						Value Added Tax 10.010 %		76.61	
						ViaTax 4.000 %		30.61	
						Value Added Tax 10.010 %		3.50	
						ViaTax 4.000 %		1.40	
						Subtotal of Other Charges		467.24	
						Total Charges		996.19	
						Deposit AmEx 37XX XX28		355.00	
						Payment DB Malone		85.64	
						Payment AmEx 37XX XX28		555.55	
						Total Deposits/Payments		996.19	
<b>ALL CHARGES SUBJECT TO FINAL AUDIT</b>									
Refund received by:									
<b>X</b>									
Remarks:									
<p><b>X</b> _____ Customer's Signature This Agreement not valid for more than one month.</p>									

**Vehicle Condition**

	Out	In

Checked Out By \_\_\_\_\_ Checked In By \_\_\_\_\_

Right



Left

Dent - X Missing - o Scratch - -

Rates Do Not Include Gas

In:	Empty	1/4	1/2	3/4	X
Out:					Full
					X

**Collision Damage Waiver**

\_\_\_\_\_ By initialing, Customer for the additional daily rate shown accepts Lessor's Collision Damage Waiver. Customer acknowledges he is responsible for loss or damage caused by theft, vandalism, fire, flood or other acts of nature and other causes not covered by Collision Damage Waiver.

**COLLISION DAMAGE WAIVER IS VOID IF CUSTOMER VIOLATES THE TERMS OF THIS AGREEMENT.** 2.75/day

\_\_\_\_\_ By initialing, Customer declines Lessor's Collision Damage Waiver and agrees to pay for all damage and/or loss to Vehicle.

**Personal Accident Insurance**

\_\_\_\_\_ By initialing, Customer accepts Personal Accident Insurance at the additional daily rate shown. 1.22/day

\_\_\_\_\_ By initialing, Customer declines Personal Accident Insurance.

**Personal Effects Coverage**

\_\_\_\_\_ By initialing, Customer accepts Personal Effects Coverage at the additional daily rate shown. 4.44

\_\_\_\_\_ By initialing, Customer declines Personal Effects Coverage.

Authorized To Drive Only In

Local 50/ \_\_\_\_\_ mile radius only; or

Originating State; or

\_\_\_\_\_

Customer rents the Vehicle in the condition noted above subject to the terms and conditions stated above and on the reverse side of this Agreement; **If Customer has presented a credit card for payment of deposit or for rental charges, all rental charges, including parking citations, may be billed to said credit card and Customer's signature below shall have been considered made on the applicable credit card voucher.**