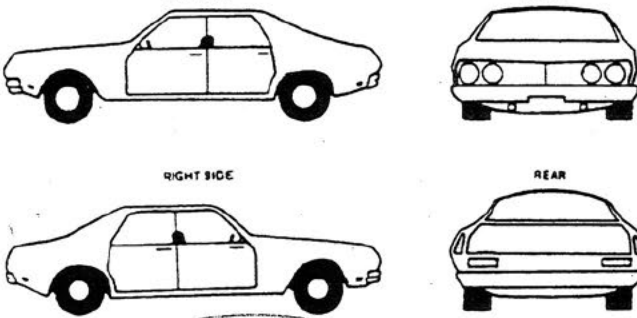


Mountaineer Car Rental LLC  
 PO Box 97-119 E. Main St.  
 Kingwood, WV 26537  
 P.(304) 329-1617-F.(304) 329 0760

No. \_\_\_\_\_

# RENTAL AGREEMENT

RENTER (PRINT)		REPLACEMENT CAR NO.		ORIG. CAR NO. 1999	
HOME ADDRESS		MAKE-MODEL-YEAR-COLOR		MAKE-MODEL-YEAR-COLOR New Malibu Gold	
CITY	STATE	ZIP CODE	LICENSE NUMBER	LICENSE NUMBER	
Roanoke	WV				
DRIVER'S LICENSE NO.	STATE	EXPIRATION DATE	ODOMETER IN	ODOMETER IN	69302
			ODOMETER OUT	ODOMETER OUT	68390
BIRTHDATE	ADDRESS		PHONE	MILES DRIVEN	DATE AND TIME IN
				906	11-12-20 4:00 A.M.
EMPLOYER	PHONE		MILES ALLOWED	DATE AND TIME OUT	
			1000/2000	10-09-20 - 7:00 A.M.	
EMPLOYER'S ADDRESS			CHARGEABLE MILES	DATE DUE EXPIRATION OF AGREEMENT	
CITY	STATE	ZIP	- 0 -	N/A	
REFERRED BY			<b>RENTAL RATES</b>		
I will not under any circumstances surrender the use of the rented vehicle to any person other than those listed below or in Paragraph 6 on the back of this Agreement. Operation of the vehicle by any driver in violation of Paragraph 6 is prohibited. If none, print NONE across this section.			Miles @	\$	
			Hours @	\$	
			Days 34 @ 39.99	\$ 1599.20	
			Weeks @	\$	
			Months @	\$	
			<b>Total Time and Mileage Charges</b>	<b>\$ 1599.20</b>	
ADDITIONAL RENTER NAME	HOME PHONE NO.	DATE OF BIRTH	Gas (Taxable)	\$	
DRIVER'S LICENSE NO.	STATE/COUNTRY	EXPIRATION DATE	Sub-Total	\$ 1599.20	
			Sales Tax or Surcharge 7% WV	\$ 111.95	
<b>PHYSICAL DAMAGE WAIVER</b> RATE \$ N/A PER DAY \$ N/A PER WEEK I accept or decline Physical Damage Waiver at the rates listed above. I assume the Waiver responsibility for loss by collision or Physical damage, regardless of cause up to \$ N/A per occurrence, which may be charged to my credit card shown below. Accepting reduces my responsibility to \$ N/A per occurrence, which may be charged to my credit card shown below.			Excise Tax	\$	
			RCI	\$	
<b>PHYSICAL DAMAGE WAIVER IS NOT INSURANCE</b>			Sub-Total	\$ 1711.15	
PLEASE INDICATE GENERAL AREA OF DAMAGE LEFT SIDE FRONT  RIGHT SIDE REAR			WV daily fee 1.00/day	\$ 34.00	
RENTAL WILL BE PAID BY <u>Renter</u> No Pets - No Smoking			Sub-Total	\$ 1745.15	
INS. CO. <u>Nationwide</u>			Less Refund For:	\$	
POLICY NO.			Total Charge	\$ 1745.15	
CREDIT AUTH. NO. DATE TIME AMOUNT AUTHORIZED BY:			Less Deposits	\$	
CREDIT AUTH. NO. DATE TIME AMOUNT AUTHORIZED BY:			Net Amount Due	\$ 1745.15	
CREDIT AUTH. NO. DATE TIME AMOUNT AUTHORIZED BY:			Net Due Renter	\$ 1745.15	
CREDIT AUTH. NO. DATE TIME AMOUNT AUTHORIZED BY:			<b>WARNING</b> • I have read carefully all driving and use restrictions on the reverse side. • I am responsible for all traffic violations and must turn in all summonses upon return of vehicle. • I will report all accidents immediately. I have read both sides of this agreement and agree to its terms and conditions. I authorize you to process a credit card voucher, if any, in my name.		
CREDIT AUTH. NO. DATE TIME AMOUNT AUTHORIZED BY:			RENTER'S SIGNATURE		
CREDIT AUTH. NO. DATE TIME AMOUNT AUTHORIZED BY:			RENTER'S SIGNATURE		
URC	AMEX	CB/DINERS	VISA	M/C	OTHER
CREDIT AUTH. NO.	DATE	TIME	AMOUNT	AUTHORIZED BY:	CHECKED OUT BY:
					CHECKED IN BY:

FINAL CHARGES ARE SUBJECT TO AUDIT

FRONT