RENTAL AGREEMENT TERMS – ORANGE GROVE PHARMACY
ORANGE GROVE SHOPPING CENTER 18/19, ORANGE GROVE COLE BAY, SINT MAARTEN DWI
Tel 1-721-544-2013/544-2166, Fax 1-721-544-3610, WWW.ORANGEGROVEPHARMACY.COM

Responsible Party Name:		Data				
Address:						
Phone #:						
Credit Card#	Type:	VisaM/CDiscover Ex	xp.date			
Drivers License or Id #	Exp. Date					
Start Date: End Date:	Number of	weeks of rental	_			
* * * * * * * * * * * * * * * * * * *	TURNED CLEAN	**************************************				
Terms: All items are rented on a weekly needs to be paid before the end date of the should it not be returned on scheduled dathereof. Rental on equipment starts the d	nis agreement. An adate. In case of non-re	dditional week of rental begins t turned on scheduled date, the la	he following day afte te fee will be an extra	er your initial week of rental a rental weekly fee or multiple		
The Customer is responsible for replacer WARNING: Sint Maarten Law provides larceny and will be prosecuted. In the event International Pharmay Outle damages arising from the contract, we w Repair Charges – If returned equipment and minor repairs required to return the I be repaired, the customer will be notified	s that failure to return ets NV d.b.a. Orange ill be able to recover appears broken due to Equipment to service	n rented equipment as agreed at Grove Pharmacy institutes lega Legal fees along with any addit o misuse, a test and repair charge. This charge will be payable at	time of rental is consultations of rental is consultational to the damage of \$50.00 may be at the end of this agree	over missing property or ed equipment. Test and (or) charged for inspection, testing ement. If the equipment cannot		
Limitation of Liability and Indemnity: Less liable to the Customer for any Incident Indemnity – The Customer agrees to profrom and against all claims, damages and I agree that I have been instructed on how the rental period so that it is returned in the I fully understand that I am responsible feriod.	nt or injury, indirect of tect, indemnify and had costs including legal w to use the equipme the same condition as	or consequential damages hower hold harmless International Phar al expenses arising out of Custor ent and take full responsibility for s when received.	ver caused, whether be may Outlets NV d.b. mer's use of the equi- per the proper use and	by negligence or otherwise. a. Orange Grove Pharmacy pment. care of the equipment during		
Customer's Signature:						
Orange Grove Pharmacy Representative: Date:						
RENTAL FEES						
ITEM	СНЕСК	RENTAL FEE (weekly)	DEPOSIT	r		
DOLLATOR (th G.INICH MULELIC)	CHECK	RENTAL FEE (Weekly)	DEFOSII	<u> </u>		

ITEM	CHECK	RENTAL FEE (weekly)	DEPOSIT
ROLLATOR (with 8 INCH WHEELS)		50	225
WALKER ALUMINUM FOLDING		50	80
WHEELCHAIR 18 INCH		50	360
WHEELCHAIR 24 INCH		60	517

Additional charges apply regarding the shipping to and from and will be added to the initial rental fee. Shipping charges may vary.

All rentals require a deposit equal to the value of the equipmet and is refunded upon non damaged return of the product.

DELIVERY (Round trip)

Mileage from the pharmacy	RATE
Cole Bay and Simpson Bay area	\$25.00
All other areas	\$55.00