



P.O. Box 5637 • Glendale, Arizona 85312
 (623) 247-3984 • 1 800 793-7460 • Fax (623) 334-0529
 Web Site: <http://www.ownersrental.com>

RESERVATION FORM

SIZE OF UNIT _____ RENTAL DATES _____ TO _____

DESTINATION _____ NUMBER OF PEOPLE _____

HOUSEKEEPING SET-UP (_____) YES _____ NO _____ AIRPORT PICK-UP: YES _____ NO _____
 (pots, pans, dishes, linens, etc.)

\$ _____ day X _____ days

RENTAL RATES: \$ _____ per week X _____ weeks \$ _____

_____ FREE MILES ¢ _____ per mile X _____ miles \$ _____

_____ GENERATOR HOURS FREE _____ PER HOUR

TOTAL ESTIMATED AMOUNT OF RENTAL (Rental and Mileage) \$ _____

ENCLOSED IS A RESERVATION FEE (25% of total) IN THE AMOUNT OF \$ _____

THE BALANCE OF RENTAL \$ _____ SECURITY DEPOSIT \$ _____ TOTAL DUE UPON PICKUP \$ _____

I understand that 50% of this reservation fee will be refunded if I cancel prior to 30 days before the rental date; otherwise, I forfeit the entire reservation fee to Owners Rental. I understand that Owners Rental acts only as a referral source in locating equipment for renters and is not a party of any subsequent agreement entered into between renters and owners referred by Owners Rental. I understand that if Owner of equipment cancels this rental due only to mechanical problems, Owners Rental will make another referral if equipment is available; otherwise, reservation fee will be 100% refundable. I understand that by signing this Reservation and Credit Information form, the information provided is subject to verification and investigation.

Date

Customer Signature

CREDIT INFORMATION - PLEASE PRINT

FULL NAME _____ SPOUSE OR SECOND DRIVER _____

HOME ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE _____ PREVIOUS ADDRESS _____ CITY _____ STATE _____

EMPLOYMENT _____ ADDRESS _____ NO. OF YEARS _____

WORK PHONE _____ SOCIAL SECURITY NUMBER _____

PLEASE CHECK: _____ OWN HOME _____ RENT - NUMBER OF YEARS AT CURRENT ADDRESS _____

****I am authorizing Owners Rental to charge my credit card. ****

I understand that Owners Rental acts as a referral service for the rental of privately owned recreation. I also understand that Owners Rental is charging the rental as a courtesy only. I agree that due to any dispute with the owner that I am waiving my right to any chargeback on these funds.

Billing Address _____

NUMBER _____ CODE # _____ EXP. _____

DRIVERS LIC. NO. _____ ST _____ EXP DATE _____ BIRTHDATE _____

2ND DRIVERS LIC. NO. _____ ST _____ EXP DATE _____ BIRTHDATE _____

MOTORHOME OWNER _____

ADDRESS _____

PHONE (HOME) _____ (ALTERNATE) _____