



4 Manor Lane
 Medford NJ 08055
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 To receive extended credit for rentals or purchases, please complete form in its entirety.

Credit Card Authorization

(Please PRINT all information)

NAME
 (as it appears on card) _____

Billing Address _____

Credit Card #: _____

Expiration Date: _____

Security Code: _____

I have read and understand QSCAV Rental Agreement and I authorize QSCAV to charge my credit card fees associated with the rental or purchase of equipment, services, and/or security deposit (including applicable taxes) and/or damage, loss, late fees that may occur as a result of the rental of such equipment.

Your Name _____ Company _____

Signature _____ Date _____

Rental Terms and Conditions:

Full terms can be view at www.qscav.com/agreement.htm. QSCAV agrees to rent AV equipment and services at the location on the date specified by the client. The client agrees to pay the total amount due for the services rendered due on receipt. A 1.50% Late Fee is added to balances not paid by the due date. Late return rental equipment will be charged fees associated with extending the rental time period. Credit Card authorization is required on all unsupervised rentals and will be charged full replacement value if equipment is not returned after 10 days. In the event any guests, employees, or agents of the client damage, lose, or destroy any equipment, the client assumes all responsibilities for fees associated with repair or replacement at actual cost or replacement value. Cancellation of this order within 24 hours (work week) will result in loss of 50% of total order, minimum \$50 fee. There are no refunds. I have read and agree to the rental conditions on the reverse side of the invoice.

There exists no other representation, oral or written, between the named parties.

Thank You for your Business!