enterprise

MO 8:00 AM - 6:00 PM TU 6:00 AM - 6:00 PM WE 8:00 AM - 6:00 PM
TH 8:00 AM - 6:00 PM FR 8:00 AM - 6:00 PM SA 9:00 AM - 12:00 PM
SU CLOSED

ENTERPRISE RENT-A-CAR COMPANY OF RHODE ISLAND, LLC
OWNER OF VEHICLE: 333 NIANTIC AVENUE, CRANSTON, RI, 029073126 (401) 946-3888
BRANCH ADDRESS:

216715.

RENTAL AGREEMENT NO. 5F75GF

RENTAL TYPE: BUSINESS SOURCE# UNIV ID#77

DATE OUT: 08/23/2016 3:48 PM

RENTER: BROWN UNIVERSITY

ADDRESS: NIANTIC AVE HOME PHONE (401)

CITY: CRANSTON STATE: RI ZIP: 02907 OFFICE PHONE

DOB: 10/07/1981 EMPLOYER

DRIVERS LICENSE NO. STATE: RI EXPIRES: 10/10/2020

START CHARGES IF DIFFERENT

ORIGINAL VEHICLE

COLOR: GRAY LICENSE NO.: N40

MODEL: JOUR ECAR#: 7LSR1

MILEAGE IN / OUT

DRIVEN

BILL TO: COMPANY

ATTN: PHONE EXT

REFERENCE NUMBER:

CONDITION AND FUEL LEVEL AGREED TO: RENTER # OF KEYS:

NO DAMAGE WITH WINDSHIELD CONDITION

X= DENT —= SCRATCH O= MISSING

CONDITION SAME ON RETURN Yes No

FUEL OUT E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F

No Gasoline Refunds

IN E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F

ADDITIONAL AUTHORIZED DRIVER(S) - EXCEPT AS REQUIRED BY LAW, NONE PERMITTED WITHOUT OWNER'S WRITTEN APPROVAL.

I REQUEST OWNER'S PERMISSION TO ALLOW AGE DRIVERS LICENSE NO. STATE EXP

WHO IS UNDER MY CONTROL AND DIRECTION TO DRIVE VEHICLE FOR ME AND ON MY BEHALF. I AM RESPONSIBLE FOR THEIR ACTS WHILE THEY ARE DRIVING, AND FOR FULFILLING TERMS AND CONDITIONS OF THIS RENTAL AGREEMENT (AGREEMENT). USE OF VEHICLE BY AN UNAUTHORIZED DRIVER WILL AFFECT MY LIABILITY AND RIGHTS UNDER THIS AGREEMENT.

RENTER: X

PERMISSION GRANTED TO OPERATE VEHICLE ONLY IN THE STATE OF RENTAL AND THE FOLLOWING STATE(S): MA RI CT

OPERATION IN ANY OTHER STATE OR COUNTRY WILL AFFECT YOUR LIABILITY AND RIGHTS UNDER THIS AGREEMENT

DAMAGE WAIVER NOTICE: THIS CONTRACT OFFERS, FOR AN ADDITIONAL CHARGE, A COLLISION DAMAGE WAIVER TO COVER YOUR RESPONSIBILITY FOR DAMAGE TO THE VEHICLE. BEFORE DECIDING WHETHER TO PURCHASE THE COLLISION DAMAGE WAIVER, YOU MAY WISH TO DETERMINE WHETHER YOUR OWN AUTOMOBILE INSURANCE AFFORDS YOU COVERAGE FOR DAMAGE TO THE RENTAL VEHICLE AND THE AMOUNT OF THE DEDUCTIBLE UNDER YOUR OWN INSURANCE COVERAGE. THE PURCHASE OF COLLISION DAMAGE WAIVER IS NOT MANDATORY UNDER THIS CONTRACT. "READ THE COLLISION DAMAGE WAIVER DISCLOSURE PROVISION CONTAINED IN THIS RENTAL AGREEMENT BEFORE SIGNING THIS AGREEMENT." RENTER: X

RENTER DECLINES OPTIONAL COLLISION DAMAGE WAIVER (CDW) AND ASSUMES DAMAGE RESPONSIBILITY. SEE PARAGRAPH 7. RENTER: X DECLINES CDW	RENTER ACCEPTS OPTIONAL COLLISION DAMAGE WAIVER (CDW) AT FEE SHOWN IN COLUMN TO RIGHT. SEE NOTICE TO LEFT AND PARAGRAPH 17. COLLISION DAMAGE WAIVER IS NOT INSURANCE. RENTER: X DO NOT INITIAL THIS BOX
RENTER DECLINES OPTIONAL PERSONAL ACCIDENT INSURANCE (PAI). SEE PARAGRAPH 10. RENTER: X DECLINES PAI	RENTER ACCEPTS OPTIONAL PERSONAL ACCIDENT INSURANCE (PAI) AT FEE SHOWN IN COLUMN TO RIGHT. SEE PARAGRAPH 19. RENTER: X DO NOT INITIAL THIS BOX
RENTER DECLINES OPTIONAL SUPPLEMENTAL LIABILITY PROTECTION (SLP). SEE PARAGRAPH 8. RENTER: X DECLINES SLP	RENTER ACCEPTS OPTIONAL SUPPLEMENTAL LIABILITY PROTECTION (SLP) AT FEE SHOWN IN COLUMN TO RIGHT. SEE PARAGRAPH 18. RENTER: X DO NOT INITIAL THIS BOX ACCEPTS SLP
RENTER DECLINES OPTIONAL ROADSIDE ASSISTANCE PROTECTION (RAP). SEE PARAGRAPH 5. RENTER: X DECLINES RAP	RENTER ACCEPTS OPTIONAL ROADSIDE ASSISTANCE PROTECTION (RAP) AT FEE SHOWN IN COLUMN TO RIGHT. SEE OPTIONAL PRODUCTS NOTICE TO LEFT AND PARAGRAPH 20. RENTER: X DO NOT INTIAL THIS BOX ACCEPTS RAP

ACKNOWLEDGMENT OF THE ENTIRE AGREEMENT, WHICH CONSISTS OF PAGES 1 THROUGH 4.

I HAVE READ AND AGREE TO THE TERMS AND CONDITIONS ON PAGES 1 THROUGH 4 OF THIS AGREEMENT, AND BY MY SIGNATURE BELOW I AM THE RENTER UNDER THIS AGREEMENT. BY SIGNING BELOW, I AM AUTHORIZING OWNER TO PROCESS CHARGES ON MY CREDIT CARD(S) AND OR DEBIT CARD(S) FOR ADVANCE DEPOSITS, INCREMENTAL AUTHORIZATIONS, DEPOSITS, AND CHARGES INCURRED, AS WELL AS PAYMENTS REFUSED BY A THIRD PARTY TO WHOM BILLING WAS DIRECTED. I CERTIFY THAT THE DRIVERS LICENSE(S) PRESENTED IS CURRENTLY VALID AND IS NOT SUSPENDED, EXPIRED, REVOKED, CANCELLED OR SURRENDERED.

RENTER: X DATE 08/23/2016

OWNER REP X EMPL. # E4317

REPLACEMENT VEHICLE

DATE OUT

COLOR LICENSE NO.

MODEL ECAR#

MILEAGE IN / OUT

DRIVEN

CONDITION AND FUEL LEVEL AGREED TO: RENTER # OF KEYS:

NO DAMAGE WITH WINDSHIELD CONDITION

X= DENT —= SCRATCH O= MISSING

CONDITION SAME ON RETURN Yes No

FUEL OUT E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F

No Gasoline Refunds

IN E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F

I WILL RETURN CAR BY: DATE 08/24/2016 TIME 7:00 AM

DEPOSIT(S): AMOUNT PAID BY

ADDITIONAL INFORMATION

THE LIABILITY INSURANCE OF ANY DRIVER OR LESSEE OF THE VEHICLE RENTED UNDER THIS CONTRACT IS PRIMARY AS REQUIRED BY R.I.G.L. 31-34-4.

DAY = 24 HOUR PERIOD

VEHICLE $20.96/HOUR
$63.50/DAY
$349.25/WEEK
$1,397.00/MONTH

$0.20/MILE CHARGE ABOVE
200/DAY
1100/WEEK
2500/MONTH

CDW OR CDW INCLUDED IN RATE

Collision Damage Included

PAI $3.00/DAY

NO SLP, BTI INCLUDED
SEE MASTER AGREEMENT

Business Travel Ins. Included

RAP $3.99/DAY

FUEL CHARGE $3.15/GALLON

RI STATE SALES TAX 7.00%/REN
RI RENTAL SURCHARGE 8.00%/RE

TOTAL CHARGES

DEPOSITS

REFUNDS

AMOUNT DUE

CLOSED BY

PAID BY CASH CHECK CHAR

RECEIPT OF CASH REFUND DATE AMOUNT RECEIVED

OWNER IS AN AFFILIATE OF ENTERPRISE HOLDINGS INC., WHICH OWNS ALL RIGHTS TO ENTERPRISE NAMES AND MARKS.

81.46 73.38

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