

Dave's Auto and Truck Service Loaner Car Agreement



ALL LOANER VEHICLES ARE NONSMOKING

The recipient of this loaner car acknowledges the following responsibilities as expresses conditions for the use and operation of said loaner car. A copy of your insurance card and driver's license will be kept on file while the vehicle is in your possession.

1. THE RECIPIENT'S INSURANCE IS PRIMARY AND WILL BE RESPONSIBLE FOR ANY AND ALL DAMAGE AND LIABILITY ARISING OUT OF OR IN ANY WAY RELATED TO THE USE AND OPERATION OF THIS LOANER CAR.
2. THE RECIPIENT WILL BE RESPONSIBLE FOR ANY AND ALL DEDUCTIBLES AND EXPENSES NOT COVERED BY HIS/HER INSURANCE.
3. THE RECIPIENT IS AT LEAST 21 YEARS OF AGE OR OLDER, HOLDS A VALID DRIVER'S LICENSE AND IS SOLE DRIVER OF VEHICLE.
4. THE RECIPIENT AGREES TO RETURN VEHICLE WITH SAME FUEL AMOUNT THAT IT LEFT WITH AND ALSO IS RESPONSIBLE FOR ANY INTERIOR/ EXTERIOR DAMGE TO VEHICLE NOT PREVIOUSLY NOTATED.

LOANER VEHICLE INFORMATION:

YEAR: 2003 MAKE: MITSUBISHI MODEL: GALANT COLOR: SILVER
VIN: 4A3AA6G93E09363 LICENSE : JJJ4790/PA

Mileage: OUT _____ IN _____
Fuel Level: OUT _____ IN _____

I hereby entirely assume sole and absolute responsibility and liability for any damage to the vehicle described above and owned by Dave's Auto Care Inc. and for any and all damages, loss, expense, fee and/or claim resulting from or relating to the operation of said vehicle while it is in my possession or under my control.

I have motor vehicle liability insurance coverage which complies with the State of Pennsylvania minimum liability requirements and is sufficient to provide primary first vehicular coverage against any and all losses, damages, expense, fee and/or claim and hereby agree to indemnify and hold Dave's Auto Care Inc. harmless from and against any and all loses, claims, damages, expenses and/or fees, including attorney's fees, related to my possession of said vehicle while it is in my possession or under my control.

CUSTOMER INFORMATION:

Name: _____ Driver's License #: _____

Insurance Company _____

Policy Number _____

Customer Signature _____ Today's Date _____