HEAVY EQUIPMENT RENTAL AGREEMENT

Name: __________________________
Address: _________________________
Date to be utilized: ________________
Time: _____________________________
From: _____________________________
To: _______________________________
Purpose: ___________________________
Date Paid: _________________________
Money Order #: _____________________
Amount $: _________________________

Equipment Requested

- Registered Chapter Member
  - Grader @ $68.90 per hour
  - Backhoe @ $63.60 per hour

- Non-Registered Chapter Member
  - Grader @ $133.56 per hour
  - Backhoe @ $178.08 per hour
  
  (Burial Fee $200 Est.)

* Additional $21.20 beyond five (5) miles from Tohatchi Chapter
* Corral Clean Up 2x a year per community member

Per Hour/Day

$ __________
$ __________
$ __________
$ __________

Full Amount Paid

 Three (3) weeks prior to the date of service.

***NO PERSONAL CHECKS OR CASH WILL BE ACCEPTED! PLEASE PAY IN ADVANCE!

NO WORK WILL BE PERFORMED UNLESS PAYMENT HAS BEEN RECEIVED***

“AVAILABLE ONLY ACCORDING TO THE OPERATOR’S SCHEDULE.”

PLEASE MAKE MONEY ORDER PAYABLE TO: TOHATCHI CHAPTER.

NO CASH OR PERSONAL CHECKS WILL BE ACCEPTED.

AGREEMENT PROVISIONS:

The Tohatchi Community Chapter will designate an operator during the rental of the Heavy Equipment. The Tohatchi Chapter, its Officials, Employers, or Representatives shall not be held liable for any injuries or liabilities of any kind to any person(s) or property caused from or during the rental of the equipment.

Because safety is our concern, we encourage person/organization to exercise extreme caution when digging around any utility lines. (Electric, natural gas, water & waste water utility lines.) Call NTUA before digging.

The person/organization renting must comply with this agreement and will be held fully liable for the equipment.

I have read and fully understand the agreement and will adhere to it.

_________________________________  _____________________________
Requestor’s Signature               Date

_________________________________  _____________________________
Authorized Signature                Date

Approved: ____________ Disapproved: ____________
TO BE COMPLETED BY THE SERVICE PROVIDER (Heavy Equipment Operator)

Equipment Department: ____________________________ Time ____________________________ Hour Meter Reading

Arrival Time to Jobsite: ____________________________ Time ____________________________ Hour Meter Reading

Beginning: ____________________________ Time ____________________________ Hour Meter Reading

Ending: ____________________________ Time ____________________________ Hour Meter Reading

Equipment Return (back to Chapter): ____________________________ Time ____________________________ Hour Meter Reading

Total Hours of Work Performed: ____________________________

Work Completed: □ Not Completed: □

Comments:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Preventive Maintenance Activity: _______ # of Hours: _______

Comments:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

I hereby state that all information documents are true and correct to the best of my knowledge. I understand that I will not engage with other business, accept or receive any compensation fee or other monetary value from any person without knowledge of the Chapter.

__________________________  ____________________________
Signature of Service Provider (Operator)  Date

Revised 07/2019