



Cinequipt, Inc.
2601 - 49th Ave N, Suite 500 • Minneapolis, MN 55430
(612) 627-9080 • Fax (612) 627-9789

NEW CUSTOMER INFO SHEET

FOR THE PURPOSES OF RENTING FROM CINEQUIPT, I MAKE THE FOLLOWING STATEMENT

Business Name _____

Your Name _____

Mailing Address _____

City _____ State _____ Zip _____

Phone (____) _____ Fax (____) _____ Cell (____) _____

Email Address _____ Web Site _____

Shipping Address (if different) _____

City _____ State _____ Zip _____

Rental Company Reference #1 _____

Contact _____ Last Rental Date & Amount _____

Rental Company Reference #2 _____

Contact _____ Last Rental Date & Amount _____

Are you Sales and/or Use Tax Exempt? [] NO [] YES

(We need your exemption certificate on file. You are only exempt from MN Sales Taxes on rentals if you are producing a television commercial.)

Do you have Insurance for Rented Equipment? [] NO [] YES

(An approved insurance certificate must be on file with us before your rental to avoid an "Uninsured Fee".)

How did you hear about us? _____

Credit Card Bill to Name _____

Credit Card Bill to Address _____

City _____ State _____ Zip _____

Credit Card Number _____ Expiration Date ____ / ____ / ____

Credit Card Type [] VISA [] MC [] DISC [] AMEX CVV _____

Signature & Date _____

I understand that a collateral deposit may be made on the credit card presented above during the rental event to guarantee the equipment is returned in the condition it was received and to guarantee payment for any damage, repairs, replacement, or rental fees. The deposit will be released once the equipment has been satisfactorily returned to Cinequipt, Inc. I also agree that any dispute related to credit card debt be governed by Cinequipt, Inc.'s Terms & Conditions listed on the back of the Rental Contract.

For Internal Use Only

Revised 1/20/17

Entered in: [] MAS90 [] ACT

New Customer Number _____