



www.rent4seasons.com  
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**RENTAL AGREEMENT**

Lessee First & Last Name _____	Phone No. _____
Billing Address: _____	Today's Date _____
Length of Rent: _____	Email Address _____
Delivery Date: _____	Site Name & Address: _____

**Equipment: Deluxe Portable Restroom Flush with Sink**

Number of Units: 1  
 Rental Rate: \$ 200  
 Delivery/Removal: \$ 80  
 Sub-total: \$ 280  
 H.S.T. 13% \$ 36.40  
 Total: \$ 316.40

Signature \_\_\_\_\_

**Terms and Conditions:**

- ✓ Billing cycle of 28 days. Request for removal of unit MUST be received in writing before the end of billing cycle, otherwise full rental for another billing cycle is payable. Title to equipment shall remain in the name of Four Seasons Portable Restrooms Inc.
- ✓ Lessee shall hold the lessor harmless from all claims, law suits, etc. which may arise from the lessee's use of this equipment.
- ✓ Lessee shall return the equipment in the same condition in which it was received, fair wear and tear excepted.
- ✓ Lessee agrees to pay the account prior to delivery. Rentals are not pro-rated.
- ✓ Four Seasons Rental Services Inc. responsibility ends at the curb. Lessee will assume liability for damages to property and cost to remove Lessor's equipment, including trucks. Service driver must have access at all time in order to service the unit.
- ✓ If this is an event, please provide delivery and removal dates.
- ✓ Removal of units only on service days. Removal on any other will be at extra cost.