

Portable Corral Rental Agreement

DEPOSIT REQUIRED: 50% of estimated rental to be applied to the cost of using corral. Deposit refunded in the case of non-use.

RENTAL RATE: \$100.00 1st day, \$50 2nd & 3rd day. A maximum of 3 days rental is allowed at one time. If not brought back by the end of the 3rd day a \$250 per day charge will be added to the equipment rental every day until the equipment is returned.

PAYMENT POLICY: Rental fees will be paid in full within 30 days of billing date. There will be a 1.5% interest charge on balances not paid within the 30 days. If not paid within 90 days there will be no further rental of any equipment and you will not be able to participate in any cost-share programs until the balance is paid in full.

GENERAL CONDITIONS:

1. Equipment will come back cleaned (manure and mud washed off) or a \$25.00 fee will be included in rental price.
2. The renter will pay for any breakage other than normal wear and tear.
3. Any movement of panels from original position must be put back where originated from prior to folding the system up.
4. The corral can not be transported from one renter to another unless approved by the Linn County SWCD.
5. The renter understands that they are liable for the corral once it is attached to their vehicle.

I (renter) will not hold the Linn County Soil and Water Conservation District, Natural Resources Conservation Service, their supervisors or employees responsible in any way for damages or losses that might, in any way, result from the use of the corral. Furthermore, I specifically agree to accept all liability with respect to the corral while in use. I will pay the charges listed above, and I understand and agree to the conditions of this agreement. I also acknowledge the equipment has been examined prior to rental and is in good condition.

Signature of Renter Phone Date

Address City State Zip Code

\$ _____ _____ _____
Deposit Date Received Received by

_____ x (\$100/first, \$50.00/2nd & 3rd) = \$ _____ + _____ - _____ = _____
Days Rental Service Deposit Balance Due
Fee Fee

Dep Check# _____ _____
Check# _____ Date Paid
Receipt # _____

Service Fee Description _____