

2534 Campbell street Kansas city Missouri 64108 Phone 816-886-3800 fax 816-338-3801 www.davincink.com

1. Rentals are defined as calendar days. Holidays and weekends included.
2. Rentals start when delivery is signed for by the company / Person renting the unit. Also, the COI of the renter starts at this time. COI of Renter is in place until Da Vinci receives the unit and checks out OK. This will be done within 24 hr of return by UPS, the client will receive an email.
3. Rentals end when units are returned to a UPS driver or Customer Service Center using the provided return label. <u>UPS Stores are not acceptable</u> . This will email Da Vinci with a timestamp of the unit being returned to UPS and end your rental contract.
4. Rentals will require a security deposit of $1\frac{1}{2}$ times the rental rate($\frac{1}{2}$). The deposit will be refunded once the unit is received, tested, and checked for damages by Da Vinci.
5. Ground shipping is demonstrated on the website www.davinciisolutions.com/what-you-need-to-know-before-you-rent/. This is for the Continental US, and shipping times are based on UPS published schedules and are subject to weather and all other (UPS related) delays. Typically 2-6 days depending on location. (WE DO NOT GUARANTEE these times so plan for this)
6. If a client needs the unit longer than the contracted length of time and does not communicate to scan@davincink.com at least 24 hours prior to the end of rental contract time. The client will be charged a \$250.00 penalty, as well as all additional rental days until the unit is returned to UPS at the rate of 150% of the contract daily rental rate.
 Requirements needed for rental to commence: Rental agreement Packet, completed & returned Copy of a current COI (certificate of insurance) completed & returned Payment in full (funded) Copy of a valid driver license (person responsible for equipment) Location of Use Addendum (included in packet) completed & returned Credit card authorization form for additional charges to include additional days, penalty, or any cosmetic damage to the unit being rented. completed & returned
8. First-time clients have a three to four-day processing period before shipment once all information and payments are received. This timeframe can be expedited to 24 hours for a fee of \$350.00. The same conditions apply as above.
Printer Name and Date

Signature of Renter

Da Vinci ISolutions

True Share / Rental Agreement

<u>م</u>	Full Legal Name						Phone Number		
CUSTOMER	Billing Address		City		State	Zip	Purchase Order Re	equisition Number	
3	Equipment Location (if not	same as above) City	State Zip		County		Send Invoice to At	tention of:	
\exists	Equipment Make	Model Number	Serial Number	Quantity	Description (Attach Separ	ate Schedule A If N	Necessary)		
INFORMATION									
	Number of	Rental (PLUE)	Applicable (501110)	Total Rent	al Term of Rental				
_	Rental Payments	Payment (PLUS)	Applicable Sales Tax (EQUALS)	Paymen		Payment Fre	equency: Daily	□ Weekly □ Mo	nthly
INT		+	=						
PAYMENT		+	=		Security Deposit		st Period Payment (PLUS)	Other (EQUALS)	Total Payment Enclosed
		+	=			+	+	=	

TERMS AND CONDITIONS

- ed above and on any schedule attached to this Rental Agreement. You authorize us to adjust the Rental we may make a profit. We are not responsible for any losses or injuries caused by the Equipment Payments by up to 15% if the cost of the Equipment or taxes differs from the supplier's estimate. This and you will reimburse us and defend us against any such claims. This indemnity will continue after Rental Agreement is effective on the date that it is accepted and signed by us, and the term of this Rental Agreement begins on that date or any later date that we designate (the "Commencement Date") and continues thereafter for the number of months indicated above. Rental Payments are due as and sign this Rental Agreement you will pay us interim rent for the period from the date the Equipment is delivered to you until the Commencement Date as reasonably calculated by us based on the Rental Payment, the number of days in that period, and a month of 30 days. Your Rental obligations are absolute, unconditional, and are not subject to cancellation, reduction, setoff or counterclaim. You agree to pay a fee of \$150.00, to reimburse our expenses for preparing financing statements, other doc- umentation costs and all ongoing administration costs during the term of this Rental Agreement, and if the Equipment is located in more than one location, an additional \$25.00 documentation fee for each additional location. Security deposits are non-interest-bearing and may be applied to cure your default. If you are not in default, we will return the security deposit to you when this Rental Agreement is ter- minated. When a Rental Payment is not made when due, you agree to pay us a late charge of 5% for each Payment or \$10.00, whichever is greater. We will charge you a fee of \$25.00 for any check that is returned. ONLY WE ARE AUTHORIZED TO WAIVE OR CHANGE ANY TERM, PROVISION OR CONDI-TION OF THE RENTAL AGREEMENT.
- 2. Title: We have title to the Equipment. If this Rental Agreement is deemed to be a security agreement, you grant us a security interest in the Equipment and the proceeds thereof. You authorize us
- interest in the Equipment and the proceeds thereof. You authorize us to sign and file Uniform Commercial Code ("UCC") financing statements on the Equipment.

 3. Equipment Use, Maintenance and Warranties: We are renting the Equipment to you "AS-IS" AND WE MAKE NO WARRANTIES, EXPRESS OR IMPLIED, INCLUDING WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE. We transfer to you any manufacturer warranties provided to us. You are required at your cost to keep the Equipment in good working condition and to pay for all supplies and repairs. If the Rental Payments include the cost of maintenance and/or service provided by a third party, you agree that we are not responsible to provide the maintenance or service and you will make all claims related to maintenance and service to the third party. You agree that any claims related to maintenance or service will not impact your obligation to pay all Rental Payments when due.
- will not be subject to any claims, defenses, or setoffs that you may have against us or any supplier.
- 5. Risk of Loss and Insurance: You are responsible for all risks of loss or damage to the Equipment and if any loss occurs you are required to satisfy all of your Rental Agreement obligations. You will Equipment will only be used for business purposes and not for personal, family or household use, and keep the Equipment insured against all risks of loss or damage for an amount equal to its replacement cost. You will list us as the sole loss payee of the insurance and give us written proof of the the Rental Agreement term. You agree that a facsimile copy of this Rental Agreement with facsimile siginsurance. If you do not provide such insurance, you agree that we have the right, but not the obli-

- 1. Rental Agreement: You (the "Customer") agree to rent from us (the "Owner") the Equipment list- gation, to obtain such insurance, and add an insurance fee to the amount due from you, on which the termination of this Rental Agreement. You will obtain and maintain comprehensive public liability insurance naming us as an additional insured with coverages and amounts acceptable to us.
- 6. Taxes: You agree to pay when due, either directly or as reimbursement to us, all sales, use and personal invoiced by us. As you will have possession of the Equipment from the date of its delivery, if we accept property taxes and charges in connection with ownership and use of the Equipment. We may charge you a processing fee for administering property tax filings. You will indemnify us on an after-tax basis against the loss of any tax benefits anticipated at the Commencement Date arising out of your acts or omissions. 7. End of Rental Agreement: At the end of the rental term, you shall return the Equipment in good
 - working condition at your cost to the selling vendor. If you fail to return the Equipment as provided herein, this Rental Agreement will automatically renew at the same Rental Payment amount for consecutive 60-day periods with Rental Payments paid to the vendor.
 - 8. Default and Remedies: You are in default on this Rental Agreement if: a) you fail to pay a Rental Payment or any other amount when due; or b) you breach any other obligation under this Rental Agreement or any other Rental Agreement with us. If you are in default we may: a) declare the entire balance of unpaid Rental Payments for the full Rental Agreement term immediately due and payable to us; b) sue you for and receive the total amount due on the Rental Agreement plus the Equipment's anticipated end of Rental Agreement fair market value (the "Residual") with future Rental Payments and the Residual discounted to the date of default at the lesser of (i) a per annum rate equivalent to that of U.S. Treasury constant maturity obligation (as reported by the U.S. Treasury Department) that would have a repayment term equal to the remaining Rental Agreement term, all as reasonably determined by us, or (ii) 3%, plus reasonable collection and legal costs; c) charge you interest on all monies due at the rate of 18% per year or the highest rate permitted by law from the date of default; and d) require that you immediately return the Equipment to us or we may peaceably repossess it. Any return or repossession will not be considered a termination or cancellation of this Rental Agreement. If the Equipment is returned or repossessed we will sell or re-rent the Equipment at terms we determine, at one or more public or private sales, with or without notice to you, and apply the net proceeds (after deducting any related expenses) to your obligations. You remain liable for any deficiency with any excess being retained by us.
- 9. Miscellaneous: You agree this Rental Agreement is a "Finance Lease" as defined in Article 2A of the UCC. You acknowledge we have given you the name of the Equipment supplier and agree that you may A. Assignment: You agree not to transfer, sell, sublease, assign, pledge or encumber either the Equipment or any rights under this Rental Agreement without our prior written consent. You agree that we may sell, assign, or transfer this Rental Agreement and the new owner will have the same rights and benefits we now have and will not have to perform any of our obligations and the rights of the new owner. or federal court in MO and irrevocably waive a trial by jury. You agree to waive any and all rights and remedies granted to you under Sections 2A-508 through 2A-522 of the UCC. You agree that the will not be moved from the above location without our consent. We may inspect the Equipment during natures may be treated as an original and will be admissible as evidence of this Rental Agreement.

I unconditionally guaranty prompt payment of all the Customer's obligations. The Owner is not required to proceed against the Customer or the Equipment or enforce other remedies before proceeding against me. I

_								
$\mathcal{L}_{\mathbb{L}}$	You agree that this is a non-cancelable rental agr	eement. The Equipment is: ■ NEW ■ USED						
T.	Signature	Date						
CUSTOMER SIGNATURE	Title							
OMEF	Print Name							
CUST	Full Legal Name							
	Da Vinci ISolutions Inc.							
	2534 Campbell Street Kansas City MO 64108							
絽	PHONE: (888) 408-6626 • FAX: (816) 886-3801							
OWNER	Rental Agreement Commencement Date Rental Agreement Number							
	Accepted By:							

U GUARANTY	waive notice of acceptance and all other notices or demands of any kind to which I may be entitled. I consent to any extensions or modification granted to the Customer and the release and/or compromise of any obligations of the Customer or any other guarantors without releasing me from my obligations. This is a continuing guaranty and will remain in effect in the event of my death and may be enforced by or for the benefit of any assignee or successor of the Owner. This guaranty is governed by and constituted in accordance with the Laws of the Commonwealth of Missouri and I consent to non-exclusive personal jurisdiction in any state or federal court in Missouri and waive trial by jury. Signature							
	Print Name							
Ж	The Equipment has been received, put in use, is in good working order	and is satisfactory and acceptable.	180					
ACCEPTANCE	Signature	Date	060EDOC180					
ACC	Print Name	Title	9090					



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 8/27/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

				PHONE (A/C, No, Ext): E-MAIL ADDRESS:			FAX (A/C, No):	the second	
- 阿拉克斯拉尔				INSURER(S) AFFORDING COVERAGE				NAIC #	
MO 640	INSURER A : INSURANCE COMPANY								
INSURED				INSURER B:					
CUSTOMER NAME				INSURER C:					
				INSURER D:					
				INSURER E :					
				INSURER F:					
			NUMBER: CL19827117:				REVISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES OF INDICATED. NOTWITHSTANDING ANY REQUESTIFICATE MAY BE ISSUED OR MAY PEREXCLUSIONS AND CONDITIONS OF SUCH P	JIREME TAIN, TI OLICIE	ENT, T HE IN S. LIN	FERM OR CONDITION OF AN ISURANCE AFFORDED BY T	Y CONTRACT C HE POLICIES D EN REDUCED B	OR OTH ESCRIE Y PAID	IER DOCUME! BED HEREIN I CLAIMS.	NT WITH RESPECT TO WHIC	CH THIS	
INSR LTR TYPE OF INSURANCE	ADDL S		POLICY NUMBER	POLICY (MM/DD/		POLICY EXP (MM/DD/YYYY)	LIMIT	3	
X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	1,000,000
CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000
			POLICY NUMBER				MED EXP (Any one person)	\$	5,000
							PERSONAL & ADV INJURY	\$	INCLUDED
GEN'L AGGREGATE LIMIT APPLIES PER:					1		GENERALAGGREGATE	\$	2,000,000
X POLICY PRO- JECT LOC		1					PRODUCTS - COMP/OP AGG	s	2,000,000
OTHER:							Employ Rel Practices Liab	\$	100,000
AUTOMOBILE LIABILITY				18 1			COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
X ANY AUTO				11/2			BODILY INJURY (Per person)	S	
ALL OWNED SCHEDULED AUTOS	1 1	- 1	POLICY NUMBER	11 2			BODILY INJURY (Per accident)	\$	
HIRED AUTOS NON-OWNED AUTOS							PROPERTY DAMAGE (Per accident)	\$	
		4						\$	
UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
EXCESS LIAB CLAIMS-MADE					1		AGGREGATE	\$	
DED RETENTION \$	1							s	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER		
ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT	\$	500,000
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	"""	1	POLICY NUMBER				E.L. DISEASE - EA EMPLOYEE	\$	500,000
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	500,000
LEASED/RENTED EQUIPMENT			POLICY NUMBER				LIMIT		100,000
							DEDUCTIBLE		1,000
									61692
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) (DaVinci Reporgraphics, DRI Holdings is named as additional insured and loss payee as thier interest may appear with respects to Rented or Leased Equipment when required by a written contract. COVERAGE \$100,000 Deductible \$1,000									
CERTIFICATE HOLDER				CANCELLAT	ION				
				SHOULD AN' THE EXPIRA' ACCORDANG AUTHORIZED REF	Y OF THE	ATE THEREOF H THE POLICY	SCRIBED POLICIES BE CAN , NOTICE WILL BE DELIVER PROVISIONS.	ED IN	BEFORE
				Mark Smith,		0 2014 400	ORD CORPORATION.		to record



2534 Campbell street Kansas city Missouri 64108 Phone 816-886-3800 fax 816-338-3801 www.davincink.com

3D-scan location Addendum

Please provide this information per rental agreement and for insurance compliance.

Below please provide locations and approximate date range of equipment location (City/State).

1.	Equipment Information:		
2.	Location #1 and Dates:		
2			
3.	Location #2 and Dates:		
4.	Location #3 and Dates:		
Conta	ct Information (Please Print):		
First N	Name:		
	Name :		
	ess:		
	Stat:		
Cell P	hone: (
Office	Phone : (
Signat	ture	Date:	

Please provide a copy of driver license / government ID



Leica BLK360 Rental Agreement Addendum

Equipment Description	Replace	ement Cost	Check out	Check In			
Leica BLK360 (SN - 3506194)	\$	\$19,200		0			
IPad Pro 12.9" (SN - DLXTC038GMW7) \$	\$ 1,599		0			
Leica BLK360 Tripod	\$	\$ 820		0			
Leica BLK360 Cover	\$	620					
Leica BLK360 Hard Case	9	\$ 470	0	0			
Leica BLK360 Batteries (Qty - 2)	9	160 / each	0	0			
Leica Battery Charger with car cable	9	\$ 260	0	0			
Apple Brand Charge Cable with Charge	Block \$	100	0	0			
Scan & GO uplift 500	9	\$2,985	0	0			
Laptop and Software (I7 64 GB 1TB HD) \$	\$ 7,599	0	0			
Laptop includes a full suite of leica softw	/are						
Damage to Equipment - Check Out Yes No New Damage - Check In Yes No New Damage Description - Out							
Printed Name Signature - Check out	ıre		Date				
Printed Name Signature Date DaVinci ISolutions Representative - Check Out							
Printed Name Signature Date DaVinci ISolutions Representative - Check In							
Printed Name Signature Renter Representative - Check In	ire		Date				

As per agreement, if all equipment and accessories are not returned in same condition as received, Da Vinci ISolution will charge for any damaged or lost items as listed above.

Please get copy of driver license







CREDIT CARD AUTHORIZATION AGREEMENT

1,			, hereby author	orize Da Vinci Reprographics, Inc. to put
through a ch	narge to my cre	edit card. Credit	card informat	ion is listed as follow:
Account #:_				Exp Date:
M/C	Visa	Amex _	Discover	Security Cod (3 #'s on back)
Cost:	+	freight (or char	ge to your car	rier acct#)
Item and De	escription:			
	ard billing addr			
Name				
Address				
	Tel:			
The address	that Da Vinci	Reprographics,	Inc. should sl	nip my order to is:
Name				
Address				
	Tel:			
Cardholder's	s Name:			
Cardholder's	s Signature:			Date:
				816-886-3801