DOWNING

Tewksbury, MA 01876
PH: 978-851-5011
FX: 978-851-5881

OPEN

Lease Agreement # 27359

Acceptance Location:

Return Location:

Lessee / Name / Address: Material Installation

Customer Contact:

Unit Application: (X) OTR ( ) Cartage ( ) Storage

Customer #: C17198 **Customer P/O #:**

Minimum Term of: **Day/Week/Month:**

Delivery/Stored Location:

Lessee to pay per unit(s) at a rate of:

$ Daily 10.16 $ Weekly $ Monthly 315

Lease Start Date: 07/28/2020

In addition, Lessee shall pay

Est /Act Miles Per Day/Wk/Mo Rate of $.04 per mile

Less: Free miles Per Day/Wk/Mo

Vehicle Protection Plan (VPP)

Accept: Decline: Rate of $ per day

In addition, for Brake wear Rate of $ per 1/32 of wear

General Liability

Accept: Decline: Rate of $ per day

In addition, for Tread wear Rate of $ per 1/32 of wear

Property

Accept: Decline: Rate of $ per day

Contents

Accept: Decline: Rate of $ per day

$5,000 $10,000 $25,000

Miscellaneous Charges:

One-Time	Recurring
Delivery	On-Site Stor. Day/Wk/Mo
Pick-Up	Steps: Day/Wk/Mo
Waiting Time	Locks: Day/Wk/Mo
Other	Ramps: Day/Wk/Mo
VPP Deductible $	Reefer Rate per hr.

Notes:

Insurance Agent/Phone#:

Auto Liability Expiration Date	General Liability Expiration Date	Physical Damage Expiration Date

In order to avoid the obligation for all sales tax(s), lessee must provide exemption certificate(s) acceptable to the appropriate jurisdiction(s). In witness whereof, the parties here to have executed the agreement subject to the terms and conditions on this side of and the reverse side of this agreement all of which shall be binding upon the lessee. Lessee hereby acknowledges receipt at the time of execution of this lease of a true, exact and fully completed signed copy. Lessee further acknowledges having read both sides of each page of this lease signed by lessee of its duly authorized agent, subject to conditions on reverse side

Signed by Lessee / Title: Date:

X

Witnessed by Lessor's Representative: Date:

X

Unit #	Serial #	License #	St.	Length	Width	Height	Year	Make	Type
968723	8T540189	0337787	TN	53	101	136	08	GDAN	

Outbound Inspection Date Out: Time Out: AM/PM

Damage Identification Symbols:
B=Bent/Broken C=Cut M=Missing T=Torn H=Hole S=Scrape

For REEFER Units: Refrig. Serial #

Fuel Level Engine Hrs

Left F Top R Interior Right Bottom Front Rear

Position:	Brand:	Trd. Depth:	PSI:	Position:	Brand:	Trd. Depth:	PSI:
LOF		11	100	ROF		8	100
LIF		10		RIF		9	
LOR		10		ROR		10	
LIR		9		RIR		10	

Tire Size

Hubodometer Out: 151724 FHWA Inspection Date:

Brakes F/A 80 Brakes R/A 70

Registration Current: Yes / No Expiration Date:

Comments: Customer pick up

Inbound Inspection Date In: Time In: AM/PM

Damage Identification Symbols:
B=Bent/Broken C=Cut M=Missing T=Torn H=Hole S=Scrape

For REEFER Units: Refrig. Serial #

Fuel Level Engine Hrs

Note: Reefers must be returned with fuels filled and batteries charged

- *All new damages and deficiencies versus outbound inspection noted below*

Left F Top R Interior Right Bottom Front Rear

Position:	Brand:	Trd. Depth:	PSI:	Position:	Brand:	Trd. Depth:	PSI:
LOF				ROF			
LIF				RIF			
LOR				ROR			
LIR				RIR			

Tire Size Disc / Spoke

Hubodometer In: FHWA Inspection Date:

Brakes F/A Brakes R/A

Registration Current: Yes / No Expiration Date:

Comments:

Inspector:

Equipment listed above is accepted by Lessee, vendor or their agent, in good repair and working condition subject to any exception noted, and includes all terms and conditions on the reverse side

Driver/Lessee Signature

Driver Name Print: Driver For:

Operators License No. State:

Trailer Damage: Yes / No Tire Damage: Yes / No

Inspector: Customer Re-bill to follow? Yes / No

Driver/Lessee Signature:

Driver Name Print: Driver For:

LESSEE DAILY SAFETY RESPONSIBILITY