

HAPPY DAZE RV'S

Sales ♦ Service ♦ Parts ♦ Rentals

TRAILER RENTAL LIABILITY FORM

PLEASE RETURN THIS SIGNED FORM AT LEAST 7 DAYS PRIOR TO DEPARTURE. FAILURE TO RETURN COMPLETED FORM MAY RESULT IN CANCELLATION OF RENTAL CONTRACT AND COMPLETE FORFEITURE OF RENTAL DEPOSIT.

DATE: _____

RENTER'S NAME: _____

RENTER'S INSURANCE COMPANY: _____

INSURANCE PHONE: _____ FAX: _____

POLICY NUMBER: _____ EXP: _____

LIABILITY LIMITS: _____ / _____ / _____

POLICY COVERS TOWING VEHICLE LISTED BELOW: YES NO

TOWING VEHICLE INFORMATION

MAKE: _____ MODEL: _____

YEAR: _____ LIC PLATE: _____

RENTAL TRAILER INFORMATION

MAKE: _____ MODEL: _____

YEAR: _____ VIN: _____

THIS FORM IS TO CONFIRM THAT THE ABOVE MENTIONED POLICY WILL REMAIN IN EFFECT WHILE TOWING A NON-OWNED TRAILER.

THIS FORM DOES **NOT** STATE COVERAGE FOR THE RENTED TRAILER.

AGENT NAME: _____ AGENT SIGNATURE: _____