

AUTO & TRUCK RENTAL APPLICATION

SECTION ONE: CURRENT BUSINESS INFORMATION

1. Business Name: _____
2. a. Mailing Address: _____
 b. Address where vehicles are garaged if different than above: _____
3. Type of Business: Individual Corporation Partnership LLC Limited Other _____
4. Phone #: _____ Fax #: _____ Mobile #: _____
5. Email Address: _____ Website: _____
6. Contact Name: _____ Contact Title: _____
7. Year Current Business Established: _____ **Federal EIN#:** _____
8. Proposed Rental Car Business Name: _____

OWNERS/OFFICERS/MANAGERS:

Full Name	Title	Years with Firm	% Own	Active?

ADDITIONAL LOCATIONS (attach separate sheet if needed)

#	Location Address	City	State	Zip
1				
2				
3				

9. Do you plan to open any additional locations within the next 12 months? Yes No
 If yes, where and when? _____

BUSINESS OPERATIONS (Indicate percentage of each in relation to total operation)

%	New Car Sales	%	Repossessions	%	Gasoline Sales
%	Used Car Sales	%	Auto Leasing/RTO	%	Propane Sales
%	Consignment Sales	%	Truck Rental	%	Mini-Mart Operation
%	Auto Body Work	%	Towing Service	%	Auto Rental
%	Auto Repair Work	%	Auto Parts Sales	%	Tire Sales
%	Vehicle Storage Lot	%	Park & Fly Operations	%	Trailer Sales

10. Are there any other business names, entities, corporations or interests not listed above? Yes No
 If yes, please list them and explain: _____

11. Do you have any business insurance currently in force? Yes (If yes, complete below) No

#	Type	Company	Liability Limit	Expiration Date
1				
2				

12. Do you have any other fleet operations insured elsewhere? Yes (If yes, list and explain) No

13. Have you ever owned OR operated a rental agency? Yes (If yes, list and explain) No

SECTION TWO: COUNTER PROCEDURES

14. Will vehicles be rented for 1 month or more? Yes No (If yes, submit details i.e. which units, to whom, term of rental)

15. What will be the average term of rental? _____ days

16. Will any vehicles be rented on a 'Buy Here Pay Here' or 'Rent to Own' basis? Yes No

17. Rental Agreements: Attach front and back copies of the rental agreement being used

Check here if you will be using the U.S. Choice System rental agreement

18. Will additional renters always be listed on the rental agreement? Yes No

19. Will additional renters be qualified the same as the primary renter? Yes No

20. Will the renters have liability and physical damage coverage? Yes No (If no, explain)

21. I have received the U.S. Choice System Counter Procedure Guidelines and I agree to adhere to the guidelines with the exception of the following:

I agree to follow the SYSTEM Counter Procedures without any exceptions.

► _____
Signature Title Date

SECTION THREE: TYPES OF RENTALS (each question should equal 100%)

A. Business _____% Military _____% Pleasure _____% Insurance Replacement _____%
Other (Specify) _____%

B. Cash _____% Credit _____%

C. Renters Local (Instate) _____% Out of State _____% Out of Country _____%

SECTION FOUR: FLEET PROFILE (How many of each rental unit)

Private Passenger: _____ Mini-vans: _____ Service Vehs: _____
Exotic/High Value: _____ 15 Pass Vans: _____ Trucks: _____
Cargo Vans: _____ Pick-ups: _____ Shuttles: _____
Other (specify) _____

22. Will vehicles be registered to the corporation? Yes No

23. Are there loss payees on the vehicles? Yes No (If yes, please list below including name and mailing address)

24. Describe any measures you take to protect vehicles (i.e. stored inside when not rented, Lojack):

SECTION SIX: AUTOS NOT AVAILABLE FOR RENT

- 25. Will any rental autos be used personally by officers, employees, friends or family? Yes No
- 26. Will employees use their own autos for business use? Yes No
- 27. Is there any transportation of customers to or from rental locations? Yes No
- 28. Is there any towing or transportation of rental units? Yes No
- 29. Is there any lending of vehicles to other rental operations? Yes No
- 30. Are there any one-way rentals? Yes No (If yes, explain: _____)

SECTION SEVEN: VEHICLE MAINTENANCE PROCEDURES

- 31. What maintenance procedures are in place on the vehicles? _____
- 32. What repairs, if any, will the insured do on their vehicles? _____

SECTION EIGHT: STATEMENTS

- 33. Have you ever declared bankruptcy? Yes (If yes, please explain) No
- _____

This application may not be used to bind coverage and no coverage commences: Completion of this application by a prospective insurance buyer is for the purpose of transmitting information only. Any agreement or contract binding insurance coverage must be done on a separate document. Coverage will commence only upon the effective date of a separate contract binding insurance coverage issued by an agent authorized by the company.

Signature: I declare to the best of my knowledge that all statements herein are true and no material facts have been suppressed or misstated. I am also aware that my operation may be inspected by the insurance company. In addition, I authorize any prior insurance carrier to release underwriting and claim information to GMI for the purpose of qualifying my business for the coverages requested.

▶ _____ ▶ _____ Date

Applicant's Name – Please Print Applicant's Signature & Title

▶ _____ Date

Agent/Producer's Signature

COMPLETE THIS SECTION IF YOU ARE AN AGENT/PRODUCER REPRESENTING THE CLIENT

- 1. Do you currently provide coverage for the client? No Yes (If yes, answer a/b/c below)
 - a. What lines of business? _____
 - b. How long have they been a client? _____
 - c. How has the client's loss experience been? _____
- 2. How did you hear of the U.S. Choice program? _____
- 3. What commercial classes and lines of business do you write? _____
- 4. Would you like to hear about our other programs? Yes No

MEMBERSHIP AGREEMENT

This membership agreement (“agreement”) is being entered into between U.S. Choice Auto Rental Systems, Inc. (“USCARS”) (“we” or “us”) and

_____ (“you” or “member”)
(Business Name)

(Address)

(City, State, Zip Code)

Each USCARS member will hold to these principles:

- A. Make available to the public, the best and most economical rentals possible.
- B. Use safe, clean, new or used vehicles.
- C. Rent no vehicles more than 10 years old unless approved in writing from USCARS.
- D. Give above average friendly, courteous service to all customers.
- E. At all times maintain the utmost integrity.

1.

In the vehicle rental business, insurance is the most important service. As a member of USCARS, you must always adhere to our loss prevention and counter procedure manual that we provide for you.

1.1

At any time, if in the sole judgment of USCARS, you have not maintained an acceptable loss history or are in default of any part of this agreement with us, we may declare this agreement terminated. At this time you will pay all monies due us and the insurance carrier.

1.2

USCARS will have the right, at any time, to replace, modify, or terminate insurance and reserves the right to change one or more of the carriers. CONVERSION and uninsured motorist coverage is not afforded in our policy unless required by state law.

2.

Upon receipt of a properly signed agreement and required payment, we will contact the insurance carrier to verify that insurance coverage can be written for you. Payment is nonrefundable unless coverage is rejected by the insurance company. If rejected, payment will be refunded within fifteen (15) working days from the date of rejection.

3.

Members may resign by submitting a thirty (30) day written resignation to the corporate office of U.S. Choice Auto Rental Systems. Upon resignation you will pay all monies due USCARS and the insurance carrier. Insurance will be cancelled.

3.1

After resignation or termination, you agree that you will not use the name U.S. CHOICE AUTO RENTAL, CHOICE AUTO RENTAL, USCARS or rental forms, signs and any other medium that might be indicative of U.S. Choice Auto Rental.

4.

Rental vehicles must be prepared for use according to the written procedures that we provide for you. High performance cars, vans over 12 passenger and off-road vehicles will not be accepted unless written authorization is obtained from the corporate office.

5.

NO PERSON LESS THAN 21 YEARS OF AGE MAY RENT OR OPERATE YOUR RENTAL VEHICLES.

5.1

USE OF U.S. CHOICE AUTO RENTAL SYSTEMS APPROVED RENTAL AGREEMENTS IS MANDATORY: NO EXCEPTIONS!

6.

When the insurance carrier approves the application, you will be given all the necessary materials to begin operation (rental agreements, counter procedure manual etc.). After receiving the startup package, the member will call the office of USCARS for instructions. We have a toll free number for you to call during regular business hours, 9:00 to 5:00 North Carolina time. Since tax and license laws vary from state to state, it will be necessary for you to consult with your local and state agencies about these matters.

INDEMNIFICATION

The member agrees to indemnify, defend and hold harmless, U.S. Choice Auto Rental Systems, Inc., it's affiliated companies, successors, assigns, directors, officers, trustees, employees and agents from any and all fines, judgments, settlements, penalties and expenses of litigation incurred or imposed on USCARS arising from the member's business. USCARS shall not be liable to the member, the member's customers or creditors for any claim arising from or related to any insurance coverage or for any insurance company's refusal to pay any claim filed by the member or any other claimant. This indemnity continues after resignation or termination.

This agreement has been executed as an agreement made in the state of North Carolina and it shall be construed in accordance with and governed by the laws of the state of North Carolina. Any legal procedures with respect to this agreement shall be brought only in a court of competent jurisdiction in Rowan County, North Carolina.

You represent that you have read this agreement in its entirety and that you have been given the opportunity to clarify any provisions and information that you did not understand. You further represent that you understand the terms, conditions and obligations of this agreement and agree to be bound thereby.

(Printed Name of Company)

(Printed Name of Authorized Officer)

_____ Date ____ / ____ / ____
(Authorized Signature)

(Printed Name of USCARS Representative)

_____ Date ____ / ____ / ____
(Signature of Representative)