



International Forklift Co.

SALES • SERVICE • RENTALS

www.internationalforklift.com

Dear Valued Customer,

Thank you for using International Forklift Co., Inc. as your equipment supplier.

We kindly request that you send a Certificate of Insurance, a crucial document for our ongoing partnership, to elenag@ifcforklift.com. Please refer to the attached sample certificate for the required coverage.

1. You must provide property coverage for “Rented Equipment” with International Forklift as the “loss payee.”
2. You must provide General Liability coverage with International Forklift as “Additional Insured”
3. Please read our rental agreement for details.

Please check our website at www.internationalforklift.com for a glimpse of the scope of IFC's services.

Sincerely,

International Forklift Co., Inc.

12358 Mc Cann Drive, Santa Fe Springs, California 90670

Phone (562) 903-0940 • Fax (562) 903-5932



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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).

PRODUCER Agency USA	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC #
INSURED Name & address of the insured	INSURER A:	Name of Insurance Co
	INSURER B:	Name of Insurance Co
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY						EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						
	<input type="checkbox"/> NON-OWNED AUTOS						
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	<input type="checkbox"/> OCCUR						
	<input type="checkbox"/> CLAIMS-MADE						
	DED						
	RETENTION \$						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATU-TORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						OTHER
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$
B	Rented Equipment Coverage						\$50,000.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

International Forklift is named as additional insured with respects to General Liability

(Additional Insured Endorsement should be attached to certificate)

CERTIFICATE HOLDER**CANCELLATION**

International Forklift Inc.
12358 McCann Drive
Santa Fe Springs, CA 90670

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

RENTAL TERMS AND CONDITIONS

1. LESSOR leases to LESSEE and LESSEE hires from LESSOR the Equipment described herein, and LESSEE agrees to pay the specified rental charges in advance during the term hereof.
2. LESSEE shall not encumber this Contract or the Equipment, nor permit the Equipment to be removed to a location other than the address shown herein, nor permit any others to use the Equipment without LESSOR'S written consent.
3. LESSEE shall be liable for and shall reimburse LESSOR for amounts equal to any sales, use, license or registration fees levied or based upon the rentals, or the Equipment, or the use or the operation thereof.
4. LESSEE agrees to care for the Equipment properly, to use it within its rated capacity and to assure that the Equipment is operated with a Driver's Overhead Guard and Load Back Rest installed except when operating conditions prevent their use, to restrict its use to LESSEE'S qualified personnel who have been previously instructed in proper Equipment operation and to prohibit anyone other than LESSOR'S authorized personnel to repair or adjust the Equipment and to notify LESSOR immediately of accidents, disabilities, failures or like information concerning the Equipment. LESSEE further agrees to pay for all damage to the Equipment resulting from improper use or abuse of the Equipment upon receipt of invoices therefor from LESSOR for LESSOR'S costs and expense of repair. LESSEE shall take care of normal needs of the Equipment, including supplying fuel, oil and water, daily checking of general condition, including oil level, cooling systems, water and batteries, recharging batteries, furnishing LP gas, fuel and cylinders, etc. LESSOR will service and maintain the Equipment in proper working condition and LESSEE agrees to make it available for servicing by LESSOR at reasonable times during LESSOR'S business hours. In the event that LESSEE requires service at times other than LESSOR'S business hours, LESSEE agrees to pay the difference between the straight time and overtime rate for mechanic's time.
5. LESSEE agrees that LESSOR shall not be liable to LESSEE nor this Contract be impugned for LESSOR'S failure to repair the Equipment if disabled or furnish substitute Equipment for any reason whatsoever and that LESSOR in no event is or shall be liable for special or consequential damages of any nature whatsoever or however caused.
6. The Equipment is leased f.o.b. LESSOR'S warehouse, and LESSEE agrees not to remove said Equipment to a location other than that shown on the reverse side hereof without prior written consent of the LESSOR.
7. LESSEE agrees at the expiration of the term or any extended term hereof or sooner termination of this Contract to return at LESSEE'S expense each unit of Equipment to LESSOR'S warehouse in the same condition as when received by LESSEE, reasonable wear and tear excepted.
8. LESSEE assumes all risk and liability for and agrees to indemnify, save and hold LESSOR harmless from all claims and liens, all loss of or damage to the Equipment and all loss, damage, claims, penalties, liability and expenses, including attorney's fees, howsoever arising or incurred because of the Equipment or the storage, use or operation thereof. LESSEE at its own expense, carry equal or greater GL limits - The General Aggregate Limit as well as the Products/Completed Operation Aggregate Limit should be \$2,000,000, with each Occurrence Limit being \$1,000,000 public liability insurance against bodily injury, including death, and against property damage, shall keep all Equipment insured at its full replacement value against fire and theft and other extended coverage. LESSEE shall furnish LESSOR with certificates of insurance designating LESSOR and its assigns as additional insured and loss payee under the policy which certificates shall provide for thirty (30) days prior written notice of cancellation. The insurance so provided shall be effective during the period from the moment of delivery of each unit under lease to LESSEE until the moment of return or surrender of possession to LESSEE or his authorized representative. If LESSEE fails to provide evidence of insurance coverage LESSOR will collect a 15% surcharge to cover LESSOR'S liability insurance costs. The 15% surcharge does not relieve LESSEE of its obligations under this provision nor does it provide insurance coverage for LESSEE.
9. If LESSEE fails to pay any rental or other sum payable hereunder when due, or if LESSEE becomes subject to any state or federal insolvency, bankruptcy, receivership, trusteeship or similar proceeding, or if LESSEE shall default in any other term of this Contract, LESSOR may immediately terminate this Contract by notice in writing to LESSEE and repossess all items of Equipment wherever they may be found, but LESSEE shall never the less remain liable for all sums then due and unpaid, plus a reasonable amount for attorney's fees and such expenses as may be expended in the repossession of the Equipment. The remedies provided herein in favor of LESSOR shall not be deemed exclusive, but shall be cumulative and shall be in addition to all other remedies in LESSOR'S favor, existing at law or in equity. Any notice hereunder shall be deemed sufficiently given if in writing it is delivered to LESSEE, personally, or sent by mail addressed to LESSEE at the address set forth upon the reverse side hereof.
10. This is a Contract of rental only and nothing herein conveys to LESSEE any right, title or interest in or to any of the Equipment, except as a LESSEE.