

PAID RENTAL CONTRACT

- 1. PRC-Saltillo reserves the right to limit the availability of equipment for rental. Products that are new to market, temporarily out of stock, or discontinued may not be available.
- 2. PRC-Saltillo will not extend paid rental periods for delays due to training. Borrower should request training PRIOR to the start of your rental period. Training may be subject to limited availability if not requested in advance. Find your local consultant at: prc-saltillo.com/consultants to request training.
- 3. PRC-Saltillo rental devices are non-dedicated. This means the integrated feature pack is enabled allowing access to the operating system to run applications and provide internet access. The device may also include additional voices and symbols. Third-party funding sources do not provide coverage for non-dedicated devices and configuration options upon purchase may be different or limited.
- 4. Equipment is available for rental for a minimum of one (1) to a maximum of four (4) weeks.
- 5. The Borrower agrees to return the rental equipment to PRC-Saltillo on or before the expiration of the rental period. This due date can be found on the equipment packing slip.
- 6. Borrower consents to be billed replacement cost if rental equipment is not returned at the expiration of the rental period. If not returned on time, PRC-Saltillo reserves the right to continue billing the customer at the rental amount up to the cost of the replacement device. PRC-Saltillo reserves the right to suspend future shipments and service assistance upon nonreturn of equipment.
- 7. This agreement must be signed and payment must be guaranteed prior to shipping. Payment can be in the form of a purchase order, check, Visa, MasterCard, Discover, or American Express.
- 8. When the Borrower is a private individual, the Borrower's credit card number is required. The credit card will only be charged if the customer designates it as a method of payment for rental, attempts at other payment methods are unsuccessful, or the equipment is not returned. If the individual Borrower does not have a credit card, their social security number is required. PRC-Saltillo will contact the customer by phone to secure credit card or social security card information. When the Borrower is a representative of a facility or business, a federal identification number or EIN# is required.
- 9. PRC-Saltillo shipping charges cover ground shipment to and from the shipping address indicated on this agreement.
- 10. Damage due to abuse or negligence, loss, or theft of a rental unit is the responsibility of the Borrower.
- 11. Upon return of the rental equipment, the new device purchase will be shipped based on current lead times. If a new unit is purchased within 90 days of the end of the paid rental period without the use of a funding source, such as an insurance company, up to four (4) weeks of the paid rental amount may apply toward the purchase. Shipping costs do not apply towards the purchase price.
- 12. PRC-Saltillo is unable to rent equipment based on incomplete Paid Rental Contract agreements. Please return all pages of this agreement.
- 13. PRC-Saltillo is bound to the rules and regulations of the state in which this contract is executed.
- 14. Please direct any questions about this policy to PRC-Saltillo Order Management.
- 15. Return signed rental contract to: PRC-Saltillo Order Management 1022 Heyl Road, Wooster, OH 44691 | Fax: 833-441-0577 | orderdept@prc-saltillo.com

TERMS OF AGREEMENT Below signature indicates that you understand and agree to the above terms. If an individual signs on behalf of a facility, facility must agree to assume responsibility for the equipment should the individual no longer be employed at the facility.

| Printed Name: | Initials: | _ Date: |
|---------------|---------------------------|---------|
| Representing: | _ Individual/Entity Name: | |
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PAID RENTAL CONTRACT

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|--|--|--|---|
| Name of Facility: | me of Facility: Address: | | |
| City: | State: | Zip Code: | County: |
| Phone: | Alternate Pl | none: | Fax: |
| Email: | | | _ |
| | | | |
| BILLING ADDRESS The facility or in | | | |
| Name/Facility: | | Conta | act: |
| Relationship to Client: Spouse | Parent Leg | gal Guardian Oth | er (specify): |
| Address: | | Email: | |
| City: | _ State: | Zip Code: | County: |
| Phone: | Alternate | Phone: | Fax: |
| METHOD OF PAYMENT Indicate n Credit Card Mastercard Visa | | | al cost for rental. Attach check or purchase order (F |
| | | | number: |
| | ecure credit ca | rd info. Best phone | number: |
| PRC-Saltillo will contact by phone to se Other Check Purchase Order (I | ecure credit ca PO must be in | rd info. Best phone i cluded) | number: |
| PRC-Saltillo will contact by phone to se Other Check Purchase Order (I | ecure credit ca PO must be in Iy Rate: | rd info. Best phone i cluded) + Shipping: | |
| PRC-Saltillo will contact by phone to se Other Check Purchase Order (I Number of Weeks: X Week <i>Please include your tax exempt certific</i> | ecure credit ca PO must be in Ily Rate: ate if your fac | Ind info. Best phone in cluded) + Shipping: <i>ility is tax exempt.</i> will contact by phone | = PAYMENT TOTAL \$ |
| PRC-Saltillo will contact by phone to se Other Check Purchase Order (I Number of Weeks: X Week <i>Please include your tax exempt certific</i> For Borrower who is a private individua number is not supplied for payment. Be | ecure credit ca PO must be in Ily Rate: ate if your fac I, PRC-Saltillo est phone num | Ind info. Best phone in cluded) + Shipping: <i>ility is tax exempt.</i> will contact by phone hber: | = PAYMENT TOTAL \$ |
| PRC-Saltillo will contact by phone to se Other Check Purchase Order (I Number of Weeks: X Week <i>Please include your tax exempt certific</i> For Borrower who is a private individua number is not supplied for payment. Be | ecure credit ca PO must be in Ily Rate: ate if your fac I, PRC-Saltillo est phone num of a facility or | ird info. Best phone i cluded) + Shipping: <i>ility is tax exempt.</i> will contact by phone ber: business, Federal ID | = PAYMENT TOTAL \$ to secure social security number if a credit card |



1022 Heyl Road | Wooster, OH 44691 Phone: 800-262-1933 | Fax: 833-441-0577 Email: orderdept@prc-saltillo.com

PAID RENTAL CONTRACT

EQUIPMENT Choose one device listed below and software, plus list accessories needed. If requesting a wheelchair mounting kit, please specify the tubing size of your wheelchair. Please carefully read item two on page one of this contract regarding TRAINING.

| Options | Products | Rate Per Week | Shipping Fee |
|---------|---|---------------|--------------|
| A | Device: Accent® 1400 Select One Vocabulary: Unity WordPower® Essence® Unidad®-Bilingual | \$90 | \$50 |
| В | Device: Accent 1000 Select One Vocabulary: Unity WordPower Essence Unidad-Bilingual | \$90 | \$50 |
| С | Device:Accent 800Select One Vocabulary:UnityWordPowerEssenceUnidad-Bilingual | \$90 | \$50 |
| D | Look [®] Eye Tracking (available for Accent 1400 and 1000 SNs 6154AC10 – 97000AC10 and above) | \$75 | \$25 |
| E | NuPoint [®] Head Tracking (available for all Accent products) | \$45 | \$25 |
| F | BJoy (joystick adaptor for wheelchairs) Option: Wired Wireless | \$45 | \$25 |
| G | Device:NovaChat® 5Includes all of the following options: Ivona, Acapela, SS, PCS, and Bilingual EnglishEnglishEnglish/Spanish | \$90 | \$50 |
| Н | Device: <u>NovaChat 8</u> Includes all of the following options: Ivona, Acapela, SS, PCS, and Bilingual English English/Spanish | \$90 | \$50 |
| l | Device:NovaChat 10Includes all of the following options: Ivona, Acapela, SS, PCS, and Bilingual EnglishEnglish/Spanish | \$90 | \$50 |
| J | Device:Via® ProSelect One App:LAMP Words for Life®TouchChat™ with WordPowerDialogue™ AAC | \$90 | \$50 |
| К | Device: Via Mini Select One App: LAMP Words for Life TouchChat with WordPower Dialogue AAC | \$90 | \$50 |

Accessories

Mounts, keyguards, and TouchGuides may be requested. Custom options are not available for rental. For specific details, visit: store.prc-saltillo.com.

| Switches (Choose up to two includes extras): | Mounts (Choose only one): | Other Accessories |
|--|---|--------------------------|
| AeroSwitch (Wireless Bluetooth Switch) | Table Stand (position on table surface) | |
| Freedom Switch (Wireless Switch for Accent Line) | Floor Stand (position 1.5 to 6 feet high) | |
| Lib Switch (Wired Button Switch) | ClampOn Mount (position on tabletop with clamp) | |
| Wobble Switch (Wired Lever Switch) | Not recommended for attachement to a wheelchair | |
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