

Cine Power & Light, Inc
10845 Vanowen Street, Unit G
818-846-0123 Tel.

Credit Card Charge Authorization/Guarantee Form

The undersigned authorizes Cine Power & Light, Inc. to rent equipment/generators/trucks to Company/Individual named:_____

Pursuant to the standard rental agreement, the terms of which are hereby acknowledged, to charge all sums under their credit card #_____

which expires on _____. Please indicate master card or visa and also include security number on back of card_____,_____.

The undersigned agrees that all monies due to Cine Power & Light, Inc. under the aforementioned rental agreement may be charged to the credit card identified above. The charges herein shall include, but shall not be limited to, equipment rental, generator rental, truck rental, loss and damages, deposit, or insurance deductible charges.

The authorization shall apply to all charges incurred during the term of the rental agreement and any extensions thereof.

In the event that the credit card company described above fails or refuses to make payment for the charges submitted, the undersigned individually or company will agree that he/she will be responsible/liable for any charges of said refusal.

The undersigned grants Cine Power & Light, Inc. the right and authorization to collect any sums due and owing under any rental agreement, or this agreement, by processing any credit card offered for payment for the charges that may include any collection fees and expenses, attorney fees and court costs.

The undersigned understands that once accepted, this agreement will be considered binding for all rentals made in the name of the company/person, unless otherwise specifically told in writing to the contrary by the company/person, any person renting equipment, generators or trucks in the company's or person's name will be presumed to have the authority and authorization to do so. Either party may terminate this agreement as long as written notice is received 15 days prior to their intent to terminate.

Company:_____ Tel_____ Fax_____

Address_____

City, Zip _____

Signed_____ Print name_____

Production Name_____ Date_____