



SunShare RV

13740 Research Blvd. Suite M-5
Austin, Texas 78750
Voice: 512.331.0164 Fax: 512.692.2632
www.SunShareRV.com

Reservation Booking Agreement for Rental

"A smile is nearly always inspired by another smile" (Anonymous)

**ALLOW 2-6 HOURS FOR UNIT
ORIENTATION/ CHECK OUT**

CUSTOMER INFORMATION (Complete all Fields) **NO CASH OR CHECKS ACCEPTED**

Name: Last M First		Home Phone: () -		Cell Phone: () -	
Street Address			City State Zip		Date of Birth / /
Do You Have Motor Home Experience? YES / NO		Anyone In Group a Smoker YES / NO		Have Pets YES / NO	
Employer		Position		Years Employed /	
Address		City State Zip		Work Phone: () -	
Emergency Contact/ Personal Reference: Last, M., First			Relationship:		Phone: () -
Personal Vehicle Information Make: Model: Year: Lic. Plate: Color: VIN#					
MUST ATTACH A COPY OF CURRENT DRIVERS LICENSE AND INSURANCE POLICY					
Insurance Information: Company: Agent Name:			Phone Number:		Policy Number:
Driver 1: List All Moving Violations in last 3 years:				Driver 1 ever had your License Revoked or suspended? <input type="checkbox"/> <small>DUI?</small>	
Credit Card: MC / Visa / Disc Amex		Number: - - -		Expiration Date: / /	
Billing Address (if different from above)			City: ST		ZIP

DESIRED RESERVATION (subject to availability, Items shaded to be filled out by SSRV Agent)

Booking Date: / /	Dates Requested (Pick-up- Drop-off) / / TO / /	Class of Unit Requested:	Vacation Services Requested? Yes/NO:	Rental Location:	Rental Agent Name:
Destination(s):		Referral:	Booking Deposit: Amex / MC / Visa / Disc / Check#: Amount:		
Estimated Miles:	Requested Pick Up Time: (Subject To Availability) AM / PM	Return Time (Subject to Late Fees) AM / PM	# Of Nights:	# In Party Adults: Children:	

ESTIMATED RENTAL CHARGES

Rental Fees: ___ Nights @ \$ ___/Night \$ _____
 (As in hotel nights 12PM check-in/ out times or additional charges apply)
 State Title Registration & Tax (\$10 day) \$ _____
 Rental Tax (___ %) \$ _____
 Total estimated Rental \$ _____
 Less Booking Deposit (non refundable) \$(500.00) _____
 Estimated Rental Balance Due: \$ _____
 Vacation Division Services (Basic \$25) \$ _____
 Security Deposit: (\$2,500, \$3,000 or \$4,000) \$ _____
 Pet/ Driver/ Other ___ Surcharge: \$ _____
 Discount Reason: ___ % \$(_____)
 Late Fees: ___ Hrs/Night @ \$ _____ \$ _____
Remaining Balance Due \$ _____

- This is a non-smoking coach. Any smoke damage noted upon return of the Coach will be immediately charged \$1000.00 for cleaning and deodorizing plus restorative charges. Please respect our other Guests.
- Pets may be allowed on a case by case basis. There is a pet surcharge of \$200.00 per pet due at time of reservation finalization. Please see your rental agent for details. Non disclosure results in a \$500 per pet violation charge plus restorative charges if any.
- Check out and Check in times are by appointment only. This unit should be returned undamaged and full of gas or necessary fees will be charged against the security deposit.
- Travel to Mexico is absolutely restricted unless certain regulations are met. Please see rental agent for details.
- Please be aware that, due to unforeseen circumstances, we reserve the right to cancel your rental (with full refund of booking deposit and rental fees) or change the unit (without refund) you reserved to a unit that is considered comparable in the existing available fleet. If unit is greater in value and amenities additional charges may apply.
- Booking Deposits will be applied to base rental charge. All reservations are final. Booking deposits are nonrefundable.
- Within 30 days of departure, the remaining balance due will be applied to the credit card. Reservations paid must clear 30 days prior to departure. Monies that do not clear will result in trip cancellation. Cancellations of reservations within 10 days of departure are nonrefundable. Security deposit must verify/ clear the day prior to departure or coach will not be allowed to depart.
- ALL reservations made within 30 days of departure must be paid in full at the time of booking. These reservations will not be eligible for refund.
- Any reservation made over the phone is considered to be an approved secure rental.
- Any damage to the Coach while rented is immediately due and payable to SSRV. These amounts are set according to market rates and best industry guess estimates if actual work is to be postponed or cannot be accurately figured upon the terms of return. SSRV Loss/Damage insurance does not limit your liability to the security deposit amount in the event of an accident. Intentional abuse of the RV and any glass breakage or chipping and cracks are not covered by SSRV insurance and any damages resulting thereof are to be reimbursed at market rates plus applicable fees by the guest and collectable upon return.
- If the coach is returned in the condition it was rented, your deposit will typically be released within 10 business days. If damages are noted prior to or within the 10 day observation period, we reserve the right to collect and hold the deposit until damages are repaired, billed accordingly with applicable service charges and fees, and paid in full. Additional charges may apply and be billed.
- We reserve the right to refuse/ cancel rental for any or no reason to any applicant. If a rental is refused, the booking deposit will typically be refunded within 7 business days. SSRV's liability is limited to monies received.

I, the undersigned prospective lessee, have reviewed and understand all the terms and conditions set forth on this agreement and hereby authorize a designee of SunShare RV, LLC to verify the above information which I have voluntarily provided, and bill me accordingly for all rental and or all other incurred damage or return fees. I understand I am fully and personally responsible and that a rental is not finalized until all forms and the "Rental Contract Agreement" is signed the and the rental fees, including applicable taxes, security/ insurance deductible deposit, return charges, fuel and or additional damage/ misuse/ abuse charges, if any, are paid in full. I understand calculation and billing of final costs may extend beyond return date due to the difficult nature of and business activity related to the RV industry-beyond any one person or firms control. Such activity in no way negates my financial responsibilities and allows all formal and legal collection procedures if not handled by me responsibly and wholly. I also understand it is my sole responsibility to file and handle all binders, claims, and information with my or any other involved person(s) insurance company with regard to this rental and any damages I may have caused or are responsible for.

Office Use Only → Copy Insurance , Verified Coverage Date ___/___/___ Copy Driver's License MVR , Contracts , Indemnity , Check in/out , Operations , Departure Photos , Success Book Pg 1 , CC Imprint , Amenities List

Printed Name _____

Signature _____

Date ___/___/___

SSRV
Document
11

SunShare RV (SSRV)©
File: SSRV Doc 11 Guest Reservation Booking Agreement
Updated: 5/8/2008 11:21:17 AM
By: Corporate

All documents are the sole property of SSRV and cannot be copied or reproduced without written authorization from the Chief Executive Officer. Penalty for doing so will be punishable to the full extent of the law.



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Additional Driver:

Additional Driver				DOB	DL#	ST	SS#:
Personal Vehicle: Color:	Year:	Make	Model	Plate #:	Expiration	Vin#:	
List All Moving Violations: [No more than 1 minor traffic violation or at fault accident and NO major violations (reckless driving, Hit and Run, DUI)] in the last 3 years:							
Type of Violation	City and State			Date	Outcome		
Have you ever had your license revoked or suspended: ___ Yes ___ No, if yes when and why?							
Do You Have Motor Home Experience: YES / NO		Do Any Other Authorized Drivers: YES / NO			If Yes, Who:		
<input type="checkbox"/> MUST ATTACH A COPY OF CURRENT DRIVERS LICENSE AND INSURANCE POLICY OF EACH AUTHORIZED DRIVER							
Insurance Information: Company:				Agent Name:			
Policy Number:				Phone Number:			

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Printed Name

Signature

Date

Additional Driver:

Additional Driver				DOB	DL#	ST	SS#:
Personal Vehicle: Color:	Year:	Make	Model	Plate #:	Expiration	Vin#:	
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Type of Violation	City and State			Date	Outcome		
Have you ever had your license revoked or suspended: ___ Yes ___ No, if yes when and why?							
Do You Have Motor Home Experience: YES / NO		Do Any Other Authorized Drivers: YES / NO			If Yes, Who:		
<input type="checkbox"/> MUST ATTACH A COPY OF CURRENT DRIVERS LICENSE AND INSURANCE POLICY OF EACH AUTHORIZED DRIVER							
Insurance Information: Company:				Agent Name:			
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Printed Name

Signature

Date