

**Absolute Freedom Mobility Scooters, LLC**  
**4516 Hwy 20 E. #208**  
**Niceville, FL 32578**  
**850-502-7409**

**NO REFUNDS  
OR EXCHANGES  
ALL SALES FINAL**

Date \_\_\_\_\_

Please Print

Name \_\_\_\_\_  
Home Address \_\_\_\_\_  
City, State, & Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
E-Mail \_\_\_\_\_  
Drivers License \_\_\_\_\_

Imprint \_\_\_\_\_  
Time Out \_\_\_\_\_  
Time In \_\_\_\_\_  
Total \_\_\_\_\_  
Contract # \_\_\_\_\_  
Scooter # \_\_\_\_\_

**Florida Statutes SS 627.7263 Rental and Leasing Driver's Insurance to be primary. Such insurance shall be primary for the Limit of liability and personal injury protection (PIP) as required as SS 324.021 and SS 621.736. Lessee is primary under this agreement.**

1. The undersigned, do hereby accept for rental the above noted item scooter # \_\_\_\_\_. I acknowledge that it is in good condition, and agree to pay the stipulated rental fee in accordance to the rates specified. I do further agree to use said scooter in a safe and prudent manner and to reimburse ABSOLUTE FREEDOM MOBILITY SCOOTERS (AFMS) in cash for the full value of said item in the event said item is lost, stolen or destroyed, or becomes damaged, to pay repair costs. The lessee, on behalf of himself, or his/her heir, assigns, executors and administrators or any minor child on whose behalf this release is executed, agrees to defend, indemnify, release, discharge and hold harmless AFMS, its officers, employees, agents, successors, or assignees from liability for all loss or damage, and any claim or action therefore, on account of injury or death to any person. Lessee agrees to pay costs for any legal action necessary including attorney and court fees.

2. Lessee assumes full responsibility for any risk of bodily injury, death, or property damage due to their negligence. AFMS, its officers, agents or employees shall be not be held responsible for any injury or damage caused by the Lessee. Lessee further agrees that this release is intended to be as broad and inclusive as permitted by the laws of the state of Florida, and that if any portion of this release or agreement is held to be invalid, it shall not affect the remaining portions of the release or agreement and the same shall remain in full force and effect. The undersigned has carefully read this document, understands its provisions and has signed it at his or her own free act. The undersigned further releases AFMS from any claim whatsoever of first aid, treatment, or service that may be rendered.

3. Lessee represents that he/she possess a current motor vehicle policy, Lessee agrees to abide by the laws of the state of Florida, applicable ordinances and rules promulgated and issued by AFMS. Lessee further agrees to hold harmless all AFMS advertisers that may have their logos on any advertising.

4. Upon termination of this contract, the Lessee will have the scooter fully charged and properly cleaned. It will be ready for pick-up at the original drop-off site at the agreed upon time. It is to be in the same condition in which it was received. Ordinary wear and tear is expected.

5. Lessee agrees to pay for loss of the rental scooter, and is liable for the price of the rental scooter to be determined solely by Absolute Freedom Mobility Scooters LLC. The renter agrees to pay for damages to the scooter or loss of its keys, parts or attachments. Should collection or litigation become necessary to collect said damage or loss, renter agrees to pay all collection fees including, reasonable attorney fees and court costs.

**I have read and fully understand the rental agreement**

DRIVERS SIGNATURE \_\_\_\_\_

Please Initial \_\_\_\_\_
