



**CAROLINA VITRECTOMY SOLUTIONS, L.L.C.
RENTAL TERMS AGREEMENT - 1 WEEK MINIMUM**

1. Payment of 1st week rental fees and any delivery fees must be made prior to delivery of equipment. After that first week rental fee of \$ 160.00, I agree to pay \$15.00 per day for rental of this equipment.
2. It is my responsibility to ensure Carolina Vitrectomy Solutions, L.L.C. receives all of the contracted rental equipment after the agreed upon rental period or I will be charged the rental fee for each day the equipment is not returned.
3. The rental equipment will be used in a (must check one):

non-smoking

smoking environment

A restocking fee of \$75.00 will be charged to the credit card on file or billed to the customer for any "non-smoking" equipment returned with the odor of smoke as determined by Carolina Vitrectomy Solutions, L.L.C.

4. If I do not return the equipment to Carolina Vitrectomy Solutions, L.L.C. fully assembled and in good condition, allowing for normal wear and tear, I will be charged a \$75.00 fee.

5. The credit card I provided at the time of rental will be used to secure additional charges incurred due to late return, damaged equipment, or for the use of non-smoking equipment returned with the odor of smoke. I will be notified prior to the application of such charges.

6. Carolina Vitrectomy Solutions, L.L.C. reserves the right to issue a \$50.00 handling charge for the products shipped prior to receiving your request for cancellation. This charge is in addition to the non-refundable shipping charges.

7. Carolina Vitrectomy Solutions, L.L.C. makes no medical representations regarding the use of the equipment. Please consult your surgeon.

8. Carolina Vitrectomy Solutions, L.L.C. is not responsible for any medical condition arising from or resulting from any medical treatment, including without limitation, eye surgery rendered to me by a surgeon or healthcare provider.

9. Carolina Vitrectomy Solutions, L.L.C. is not responsible for any injuries/damages resulting from use of the equipment in a manner not intended.

10. Carolina Vitrectomy Solutions, L.L.C. has provided me instructions on the proper use of this equipment.

My signature below and/or the placement of an order signifies acceptance of the "RENTAL TERMS AGREEMENT" and conditions listed herein.

Signature of Customer

Printed Name of Customer

Date