VEHICLE AGREEMENT



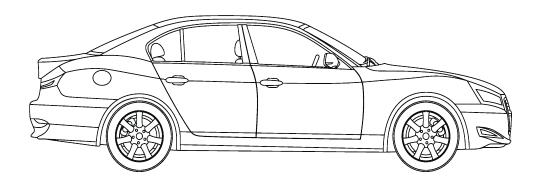
LOANED VEHICLE

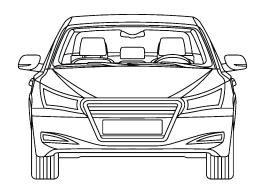
| Vehicle Y | ear: Vehicle Make: _ | Vehicle Model: |
|------------|--|--|
| VIN #: | Color: _ | Plate #: |
| | | |
| | | |
| _ | Date: | Date: |
| OUT | Mileage: | Mileage: |
| Ō | Fuel level: 34 ½ 4 Empty | Fuel level: 3/4 1/2 1/4 Empty |
| | Checked out by: | Checked out by: |
| | | |
| | | |
| I hereby e | entirely assume sole and absolute responsi | bility and liability for any damage to the Vehicle described |
| above and | d owned by REV LLC and for any and all dar | mages, loss, expense, fee and/or claim resulting from or |
| relating t | o the operation of said vehicle while it is in | my possession or under my control. I acknowledge that |
| the prese | nt exterior condition of the vehicle is as sh | own below. I agree to return the vehicle within 1 business |
| day of no | tification of completion of my vehicle's rep | pairs or pay an additional \$50 per day from that point |
| forward f | or storage of my repaired vehicle | Initial |
| | | |
| l agree no | ot to smoke in the vehicle or operate the ve | hicle while under the influence of alcohol or drugs and will |
| always op | erate the vehicle in a safe and legal manne | r Initial |
| | | |
| I agree to | return the vehicle with the same fuel leve | el that is marked above or be charged \$5.00 per gallon |
| needed t | o match the outgoing fuel level. I also agr | ee that I am at least 25 years of age, and that I will not |
| allow the | vehicle to be loaned, rented or driven by a | any other person and will not go beyond a 50-mile radius |
| of REV LL | .C Initial | |
| | | |
| | _ | e which complies with the State of TEXAS and is sufficient |
| • | | ny and all losses, damages, expense, fee and/or claim and |
| | - | ess from and against any and all losses, claims, damages, |
| - | | ted to my possession of said vehicle while it is in my |
| possessio | n or under my control, regardless of fault. | Initial |

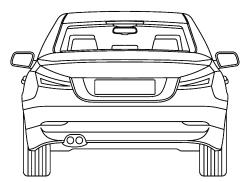
VEHICLE PRE-CHECK

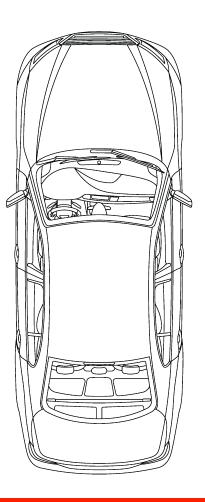
Borrower Information:

X = Dent Customer ______Initial 0 = Missing — = Scratch









CUSTOMER INFORMATION

| Full Name: | | | Driver license #: | | |
|--------------------|----------------|-------|-------------------|------------------|--|
| | Last | First | | | |
| Address: | | | | | |
| | Street Address | | | Apartment/Unit # | |
| | City | | State | ZIP Code | |
| Phone: | | | Email: | | |
| Insurance Company: | | | Policy Number: | | |
| Agent: | | | Expiration: | | |
| | | | | | |
| | | | | | |
| Print name: | : | | | | |
| | | | | | |

Signature: