

374 FSS VEHICLE OPERATIONS U-DRIVE RENTAL CONTRACT



OV#		Today's Date			
Lessee Last Name		Lessee First Name		Rank	Organization
Email Address			Duty Phone	Cell Phone	
Type	Destination(s):				Snow Chains
Reservation Period	Date Out	Date In	Time Out	Time In	Credit Card Last 4
OVERNIGHT SUPER SAVER PLAN		No	Extend rental period to cover from 4:30 p.m.–6:30 a.m. for an additional \$35. Must be requested at time of contract to be applied. Only applicable beyond 24 hour rental period.		

Vehicles can be rented by authorized MWR users who are at least 18 years old, possess a valid ID card with unrestricted access Yokota AB and possess a valid USFJ Form 4EJ or other approved driver's license IAW USFJI 31-205.

By Checking each box, I fully understand that I am responsible for:

<input type="checkbox"/>	Paying the initial deposit equivalent to the first day rental and providing a valid Visa, AMEX or Master Card at the time of reservation.
<input type="checkbox"/>	Canceling the reservation during regular office hours, Monday–Friday, 6:30 a.m.–4:30 p.m., at least two business days prior to the reservation date to receive a refund of my deposit. Vehicles not picked up by COB on the scheduled reservation date will be canceled without refund.
<input type="checkbox"/>	Pick-up/ Return vehicles at building 1290 between 6:30 a.m.–4:30 p.m. The rental period is 24-hours, starting at the time of pickup.
<input type="checkbox"/>	Payment of all rental fees and any additional charges incurred during the contract period. Overnight Super Saver Plan must be requested in advance and is not applicable in the case of late return.
<input type="checkbox"/>	Payment of refueling charges if not fueled upon return (AAFES pump price plus \$1/gallon) and late fees (\$80/day in addition to the regular daily rate) for returns after the scheduled drop off time.
<input type="checkbox"/>	Interior cleaning fee of \$50-\$200 for extraordinary situations.
<input type="checkbox"/>	Damage and/or loss of items issued with the vehicle such as tire chains, jacks, etc.
<input type="checkbox"/>	Not smoking or using smokeless nicotine delivery products, to include vaping, in the rental vehicle.
<input type="checkbox"/>	Payment of initial ¥100,000 of damages to the vehicle regardless of who is operating including approved additional drivers.
<input type="checkbox"/>	Not subleasing the vehicle or allowing persons to drive the vehicle that are not listed as authorized drivers on this contract.
<input type="checkbox"/>	Payment of 100% of damages incurred by any unauthorized or unidentified drivers not listed on this contract.
<input type="checkbox"/>	Ensuring that the vehicle is secured and locked at all times when unattended.
<input type="checkbox"/>	Inspecting the vehicle at the time of pick up. All damage must be annotated on the inspection sheet. Failure to comply may result in the liability of damages not annotated.
<input type="checkbox"/>	Properly completing and logging all toll tickets used on the Japanese National Highway System and returning unused toll tickets to Vehicle Operations. I also understand that I am responsible for paying the costs of tolls incurred on private toll roads.
<input type="checkbox"/>	Ensuring any pets that are transported remain inside a kennel while inside the vehicle. Cleaning fees will be assessed for excessive pet hair on the interior, excrement, urine or other unsanitary conditions or odors.
<input type="checkbox"/>	Not operating the vehicle under the influence of drugs or alcohol, for profit, to tow or push, in the commission of a crime, or to transport items that may damage the vehicle.
<input type="checkbox"/>	Reporting any and all mechanical failures by calling Vehicle Operations immediately when experiencing mechanical failure. Refunds for vehicle related expenses will not be made without prior authorization.

374 FSS VEHICLE OPERATIONS U-DRIVE RENTAL CONTRACT cont.



Reservation #: _____

	Calling the nearest military law enforcement agency, Yokota AB Security Forces, the Japanese police and FSS Vehicle Operations in the event of an accident. Additionally, completing SF Form 91 and insurance accident report forms.
	Not violating this agreement, AFI directives and Japanese law that results in an incident, accident, injury or property damage. Violations may result in paying for the total cost of repairs and other costs incurred.
	Completing AF Form 1800 and mileage logs daily.
	Acknowledging that Vehicle Operations will provide commercial liability insurance as covered in AFI-34-208. In the event of an accident, this insurance will cover authorized drivers for damages limited to the following: Bodily Injury - Unlimited Property Damage - Unlimited Comprehensive/Collision - Vehicle value less the ¥100,000 deductible The Lessee is personally liable for any damages that exceed or cannot be covered by the above insurance

I acknowledge that I have read, initialed each item and understand that I am the responsible party on this rental contract. I also acknowledge that failure to complete the required information on any toll tickets used during this rental will result in my U-Drive rental privileges being suspended until a written request for reinstatement of rental privileges that identifies the corrective action is approved by my Commander and 374FSS/CC or designee.

Lessee Signature: _____ Date: _____

Vehicle Operations staff member will complete the bottom section of this page, please go to page 3 to add information for additional drivers

Deposit Amount		Payment Method		AF Form 2557 #		Estimated Total Charges		
\$						\$ 0		
Reservation #		OV #		Date Returned		Time Returned		
Current Month Charges			Receivables			Additional Fees		
Days:	\$	Days:	\$	Late Fees	\$			
Weeks:	\$	Weeks:	\$	Cleaning Fees	\$			
ONSS:	\$	ONSS:	\$	Fuel Charges	\$			
Current Total	\$ 0	Receivable Total	\$ 0	Total	\$ 0			
Bal. Payment		Bal. AF Form 2557 #		Reservation #		Less Deposit		\$
						Balance Due		\$ 0

Lessor Signature: _____ Date: _____

Remarks:



AUTHORIZED DRIVERS

Reservation #:					
Lessee Last Name		Lessee First Name		Rank	Organization
Email Address			Duty Phone		Cell Phone
Driver's License Type:	USFJ Form 4-EJ	Driver's License #:			Exp Date:

Additional Driver #1 Last Name		Additional Driver # 1 First Name		Rank	Organization
Email Address			Duty Phone		Cell Phone
Driver's License Type:	USFJ Form 4-EJ	Driver's License #:			Exp Date:

Additional Driver #2 Last Name		Additional Driver # 2 First Name		Rank	Organization
Email Address			Duty Phone		Cell Phone
Driver's License Type:	USFJ Form 4-EJ	Driver's License #:			Exp Date:

Additional Driver #3 Last Name		Additional Driver # 3 First Name		Rank	Organization
Email Address			Duty Phone		Cell Phone
Driver's License Type:	USFJ Form 4-EJ	Driver's License #:			Exp Date:

Additional Driver #4 Last Name		Additional Driver # 4 First Name		Rank	Organization
Email Address			Duty Phone		Cell Phone
Driver's License Type:	USFJ Form 4EJ	Driver's License #:			Exp Date:

Data Required by the Privacy Act of 1974

Authority: Title 10 US Code, Section 3012 (B) (1):(9)

PRINCIPAL PURPOSE: Eligible patrons are required to furnish their personal information on this form. The data on this form is necessary in order to allow individuals authority to utilize government equipment.

ROUTINE USES: The data collected will be used to verify identification and to distinguish among individuals with the same surname.

DISCLOSURE: Voluntary, however, if this information is not furnished, a vehicle rental agreement will not be issued.