Information Station Specialists, Inc.
RadioExpress™ Advisory Radio Station

◯ Quote ◉ Estimate ◯ Proforma Invoice

Number:	
Date:	
Author:	
Email:	
Number of Locations:	
Notes:	

Contact:	
Agency:	
Address:	
City/State:	
Zip Code:	
Phone:	
Fax:	
Email:	

Description	Quantity	Unit Price	Amount	
				☐
				☐
				☐
				☐
Services				
Technical Training & Setup				☐
FCC Temporary License				☐
				☐
Message Recording Service				☐
Option				
				☐
Special Addition or Deletion (if applicable)				
				☐
				☐
				☐
				☐
				☐
Packaging & Handling				☐
Taxable items are checked, *on right*. If you feel we have not charged at the appropriate rate for your state, please let us know. Adjust the total before ordering. If we do not collect applicable taxes, you might be required to remit them directly to your state government as "use tax." Also, we require a completed "State Tax Info Form" to accompany all orders. A blank copy is attached.				
		Total		

Notes

** Includes antenna system, transmitter, cables, digital voice recorder, mixer, mics, weatherproof case, power supply & instructions.*

Please complete Pages 2 & 3 of this form. Be sure to sign and date the Page 2 agreement. Fax your completed document to us at Fax Number (616) 772-2966, Attention Bill Baker. Also, please mail (via USPS) the signed original document to Information Station Specialists, PO Box 51, Zeeland, MI 49464-0051, Attention Rental Division/Bill Baker. Thank you.

Information Station Specialists, Inc.
PO Box 51, Zeeland, MI 49464-0051- 616.772.2300 - Fax 616.772.2966 - iss@theRADIOsource.com - www.theRADIOsource.com

I, _____, of _____ shall rent the aforementioned radio system from Information Station Specialists, Inc., at the stated rate, from the date of receipt until the date of reshipment to Information Station Specialists, Inc. (The rental period shall not include freight days. All shipping charges are the responsibility of the renter, both for delivery and return of the system. 30 days in advance of the rental date, the renter's credit card will be charged for the rental amount plus special shipping charges. Cancellation within 30 days of rental will qualify the renter for a 90% refund. Signature below indicates agreement to these terms.)

I agree to insure or take responsibility for the rented equipment against all forms of hazard and theft and be responsible for all costs to Information Station Specialists caused by theft or damage to the equipment while in my possession or while being rented. This includes loss or damage while in shipment, if it is not adequately insured as described below. If equipment requires repair as a result of this rental, upon return to Information Station Specialists, I authorize the company to charge my card for the damages. This does not include insured loss or damages while in transit reimbursed to Information Station Specialists by the freight carrier. NOTE: It might be useful to save shipping containers to re-use for return shipment. NOTE: It might be useful to save shipping containers for re-use when returning equipment to Information Station Specialists.

A certificate of insurance in the renter's name must be provided to Information Station Specialists in advance of the rental period. Information Station Specialists must be listed as certificate holder and additional insured with regard to general liability. The form must show that the insurance covers rented/listed equipment.

Should operational problems occur with the system during the rental, days of non-operation shall be subtracted in a prorated fashion from the amount owed Information Station Specialists. I understand that operational problems -- whether caused by a defective component, incorrect setup or operation - do not absolve me or my company/agency from responsibility for freight and prorated rental charges. The exception is a situation where Radio Express arrives not functioning due to freight damage. In this case, Information Station Specialists shall pay outbound freight, the renter shall pay the return freight and the freight company shall be responsible for repair costs.

Component replacement during the rental shall be at the option of Information Station Specialists. Any outbound freight involved in component replacement shall be paid by Information Station Specialists.

Upon completion of the rental, I will return equipment to . . .

Information Station Specialists, Inc.
Rental Receiving
3368 88th Ave.
Zeeland, MI 49464

I will have freight insured for $5,000 and ship UPS ground. Cost of return freight shall be at the renter's expense.

Signature _____ Signature Date _____

Rental Dates from _____ to _____

Credit card type, number and expiration date, including numbers that appear in the signature panel (on the rear of the card):

MC/VISA (circle) Number _____
(Will be charged 30 days in advance of shipment. 90% refund for cancellation within 30 days of rental date.)

Expiration _____ Rear Numbers _____

Shipping Address

_____

Mailing address, if different

_____

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State Tax Information Form

Provide us by fax or email at time of order

Although this form, if completed online, it cannot be saved digitally intact unless you have Adobe Acrobat Pro software; but you can print and fax it or email it intact by clicking the below "Submit by Email.".

Submit by Email

Today's Date: _____

Contact Person: _____

Job Title: _____

Organization: _____

Address: _____

City/State/Zip: _____

County: _____

Phone & Fax: _____

Email: _____

Federal ID Number (9-digit EIN/TIN): _____

For Internal Use Only

State Tax Code ___ - ___ - ___ - ___

Classification

If you are a government agency, indicate the classification.

☐ *Federal* ☐ *State* ☐ *County* ☐ *City /Town* ☐ *Township* ☐ *Village* ☐ *Tribe* ☐ *Authority* ☐ *District* ☐ *Foreign*

Or, if you are a non-government agency, indicate the classification.

☐ *Private Corporation, Partnership or Sole Proprietor* ☐ *Non-Profit Entity* ☐ *Individual Purchaser*

Purchase

Purchase consists of . . .

☐ *Equipment/Equipment & Related Services* ☐ *Rental of Equipment & Related Services* ☐ *Services Only*

If Taxable Sale

Based on our company's relationship with your state, we may/may not collect state tax. **If, under the laws of your state, purchases from us are taxable, indicate the sales tax rate that applies and any local tax code numbers.**

Tax Rate % _____ *Local Tax Code Applicable* _____

☐ **Or, the sale is taxable BUT you are paying "Use Tax" directly to your state instead of sales tax to us.**
(A "DIRECT PAY" certificate from your state must be attached.)

If not a Taxable Sale

Select the reason state tax does not apply and provide requested numbers and documents.

☐ *You are a federal agency.*

☐ *Your state has no state sales tax.*

☐ *Sales of services only are not taxed under your state's laws.*

☐ *Sales of services performed out of state are not taxed under state laws.*

☐ *Your agency or entity is tax-exempt. Your tax-exempt number is* _____

☐ *This purchase is for resale or industrial processing.*

Your resale certificate number is _____ Attach certificate.

Your industrial processing number is _____ Attach certificate.