

# STAGE EQUIPMENT AND LIGHTING, INC.

12250 N.E. 13th Court • Miami, FL 33161 • 305.891.2010 • FAX 305.893.2828

Internet: <http://stageequipment.net>



Dear Valued Customer,

Stage Equipment and Lighting, Inc. is currently in the process of updating our accounting procedures and software. A recent review of our records indicates significant “gaps” in our customer information database. Therefore we are requiring all new and existing clients to submit an updated ***Application for Credit***.

## **Attached you will find several forms requiring your immediate attention to apply for or retain your account with us:**

**APPLICATION FOR CREDIT:** Must be completed if you desire to receive, or to continue to receive, credit terms - (if you wish to pay in advance or upon delivery; simply fill out the first page and the requested Bank Information, skipping the “Trade References” section of this form).

**SALES AGREEMENT:** Must be signed by an authorized principal of your company.

**US GOVERNMENT W-9 FORM:** Must be completed if your company is a corporation.

**CREDIT CARD AGREEMENT FORM:** This form is mandatory for all clients.

**RENTAL AGREEMENT:** This form is mandatory for all rental clients.

If you have a **FLORIDA TAX EXEMPTION NUMBER** please attached a signed and dated copy when you return this application.

Thank you in advance for your prompt attention,  
STAGE EQUIPMENT AND LIGHTING, INC.  
Credit Department



Please Sign and Return with a \$35.00 Check to cover Processing

Stage Equipment and Lighting, Inc.



# STAGE EQUIPMENT AND LIGHTING, INC.

12250 N.E. 13th Court • Miami, FL 33161 • TELE: 305.891.2010 • FAX 305.893.2828  
4600 S.W. 36th Street • Orlando, FL 32811 • TELE: 407.425.2010 • FAX: 407.648.2604

## Credit Application

### Basic Information

Business Name: \_\_\_\_\_

Trade Name or DBA: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Fax: \_\_\_\_\_

Shipping Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ WWW: \_\_\_\_\_

Federal Tax ID #: \_\_\_\_\_ State of Incorporation: \_\_\_\_\_ Year Business Started: \_\_\_\_\_

D & B #: \_\_\_\_\_ Tax Exempt # (enclose appropriate documentation): \_\_\_\_\_

Description of Business: \_\_\_\_\_

Type of Business: Corporation Partnership: Sole Proprietorship: LLC: Other

Annual sales volume: \_\_\_\_\_ Number of employees: \_\_\_\_\_

Amount of credit requested: \_\_\_\_\_ Estimated opening order: \_\_\_\_\_ Anticipated monthly volume: \_\_\_\_\_

Has applicant or principal ever filed a voluntary petition in bankruptcy? Yes No Year

Has a tax lien been filed against applicant or principal within last six months? Yes No Year

Do you use purchase orders: Yes: No:

Name of persons authorized to make purchases or sign purchase orders:

\_\_\_\_\_  
\_\_\_\_\_

Accounts payable contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Information on Officers/Owners

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ \*SS #: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ \*SS #: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ \*SS #: \_\_\_\_\_

\* required if partnership or sole proprietorship

**Property Information**

Owned: Year Purchased: \_\_\_\_\_ Value: \_\_\_\_\_ Mortgage Amount: \_\_\_\_\_  
Rented: Lease Expires: \_\_\_\_\_ Landlord: \_\_\_\_\_

**Banking Information**

Bank Name: \_\_\_\_\_ Checking Acct. #: \_\_\_\_\_  
Address: \_\_\_\_\_ Account Officer: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Trade References** (preferably within the entertainment industry)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

**Conditions of Sale**

In consideration of Stage Equipment and Lighting, Inc. extending credit to the Applicant, the Applicant agrees to pay for all items delivered to, or at the request of, the Applicant in accordance with the terms of the invoice: Any invoice unpaid on the last day of the month in which it is due will be subject to a 1-1/2 % monthly service charge, and an additional 1-1/2 % service charge (annual percentage rate 18%) will be due every thirty (30) days thereafter. A waiver of any one or more service charge(s) shall not be deemed to be a waiver of any future service charge(s). Applicant further agrees that with regard to such service charges, the Applicant and Stage Equipment and Lighting, Inc. are parties to a written contract. Should it become necessary to place the account with a collection agency or attorney, the Applicant agrees to pay all collection costs and attorney fees in addition to the other sums due. No returns without prior authorization. A 20% restocking fee may be assessed on returned merchandise. A fee of \$50 will be assessed on all returned checks. Applicant, in signing this application, also authorizes the above listed banking and trade references as well as credit bureaus to respond to credit inquiries regarding Applicant's account. Applicant warrants the information set forth in this application is accurate and complete. Applicant shall notify Stage Equipment and Lighting, Inc. in writing at least thirty (30) days prior to any change of ownership, which notice shall include a complete credit application from new owner. Stage Equipment and Lighting, Inc. may, regardless of the terms stated on the invoices, require all outstanding amounts be paid in full on demand upon change in ownership. Faxed documents will be deemed as originals. All transactions will be governed by the laws of Florida. Stage Equipment and Lighting, Inc. reserves the right to alter or suspend credit at any time.

Understood and Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

**Personal Guarantee**

The individual by signing this credit application is executing this application on behalf of Applicant and personally guarantees, and agrees to be personally liable for failure of the performance by Applicant of, any and all of Applicant's obligations under this application with Stage Equipment and Lighting, Inc. The personal guarantee also applies in the event that the Applicant declares bankruptcy or applies for bankruptcy protection.

Guarantor Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Guarantor Name: \_\_\_\_\_ SS #: \_\_\_\_\_  
Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

# SALES AGREEMENT

1. Payment terms will be “payment with order” only until credit has been established.
2. Payments will be applied to your oldest open invoices. Delinquent payments will be billed back for the balance due, plus accrued interest.
3. If a check is returned to us for any reason, your account will immediately go on COD terms (Cash or Bank Check Only). It will remain this way until such time as it is deemed appropriate to put you back on open account. A fee of \$50 will be assessed on all returned checks.
4. Any account over 10 days PAST DUE will automatically go on COD terms. It will remain this way until such time as it is deemed appropriate to put you back on open account.
5. All items are priced in U.S. Dollars, FOB either our Warehouses or Point of Manufacture as determined at time of sale. Shipping Charges are paid by the buyer and our responsibility ceases upon delivery to the freight carrier. Acceptable methods of payment are company check, bank check or cash.
6. Commodities are warranted and guaranteed only to the extent and in the manner warranted and guaranteed by the manufacturer, and then only to the extent we are able to enforce such a warranty or guarantee.
7. We reserve the right to use the credit card information you supplied for any PAST DUE invoices including interest and convenience fees.
8. All Merchandise is sold with the express understanding that it remains the property of STAGE EQUIPMENT AND LIGHTING, INC. until it is paid for in full. In the event it is not completely paid for within the period specified on the original invoice STAGE EQUIPMENT AND LIGHTING, INC. has the right to enter the premises where the equipment is stored or installed, to disconnect it and remove it without interference.
9. All merchandise is sold in accordance with the above terms and the “Conditions of Sale” as stated in our Credit Application.
10. RETURNS: Special Order, Non-Stock Custom Ordered, and Manufacturer Direct Items are not returnable. A 20% restocking fee may be assessed on returned merchandise. All returns must be accompanied by an original sales receipt. No returns will be accepted after 30 days of purchase. Returned items must be in original packaging and in new/resalable condition.
11. STAGE EQUIPMENT AND LIGHTING, INC. reserves the right to terminate any agreement without prior notice or cause.

I HEREBY ACKNOWLEDGE DISCLOSURE OF THE FOREGOING TERMS:

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Title \_\_\_\_\_

Please Sign and Return with a \$35.00 Check to cover Processing

**Applicant must sign both the APPLICATION FOR CREDIT and the SALES AGREEMENT for this application to be processed.**

**Please allow 2-3 weeks for processing**

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
 requester. Do not  
 send to the IRS.**

<b>Print or type See Specific Instructions on page 2.</b>	<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	<b>2</b> Business name/disregarded entity name, if different from above	
	<b>3</b> Check appropriate box for federal tax classification; check only <b>one</b> of the following seven boxes: Individual/sole proprietor or single-member LLC      C Corporation      S Corporation      Partnership      Trust/estate Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <b>Note.</b> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. Other (see instructions) ▶ _____	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	<b>5</b> Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	<b>6</b> City, state, and ZIP code	
	<b>7</b> List account number(s) here (optional)	

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

<b>Social security number</b>		
	-	
	-	
<b>or</b>		
<b>Employer identification number</b>		
	-	

**Note.** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

## Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.*

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

**Note.** If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

## Backup Withholding

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

**Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code* on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships* above.

## What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code* on page 3 and the Instructions for the Requester of Form W-9 for more information.

## Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

## Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

## Specific Instructions

### Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

**Note. ITIN applicant:** Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

**Line 2**

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

**Line 3**

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

**Limited Liability Company (LLC).** If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

**Line 4, Exemptions**

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

**Exempt payee code.**

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 5 <sup>2</sup>
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

<sup>1</sup> See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup> However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

**Exemption from FATCA reporting code.** The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

**Note.** You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

**Line 5**

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

**Line 6**

Enter your city, state, and ZIP code.

**Part I. Taxpayer Identification Number (TIN)**

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note.** See the chart on page 4 for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at [www.ssa.gov](http://www.ssa.gov). You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/businesses](http://www.irs.gov/businesses) and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting [IRS.gov](http://IRS.gov) or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note.** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

**Part II. Certification**

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code* earlier.

**Signature requirements.** Complete the certification as indicated in items 1 through 5 below.

- 1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
- 3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.
- 4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

**What Name and Number To Give the Requester**

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
4. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee <sup>1</sup> The actual owner <sup>1</sup>
5. Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 2.

\*Note. Grantor also must provide a Form W-9 to trustee of trust.

**Note.** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

**Secure Your Tax Records from Identity Theft**

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

**Protect yourself from suspicious emails or phishing schemes.** Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to [phishing@irs.gov](mailto:phishing@irs.gov). You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: [spam@uce.gov](mailto:spam@uce.gov) or contact them at [www.ftc.gov/idtheft](http://www.ftc.gov/idtheft) or 1-877-IDTHEFT (1-877-438-4338).

Visit [IRS.gov](http://IRS.gov) to learn more about identity theft and how to reduce your risk.

**Privacy Act Notice**

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.



# STAGE EQUIPMENT AND LIGHTING, INC.

12250 N.E. 13th Court • Miami, FL 33161 • 305.891.2010 • FAX 305.893.2828  
 Internet: <http://stageequipment.net> • E-Mail: [mail@seal-fla.com](mailto:mail@seal-fla.com)



To Our Valued Customers:  
**RE: New Florida Annual Resale Certificate**

As you are probably aware, the Florida Department of Revenue has changed the rules for resale/exemption certificates. The Department has issued a new Annual Sales Tax Certificate, (Form DR-13) to each registered reseller. Each year we are required to have a current COPY of your Florida Resale Certificate.

In order to maintain your tax exempt status, please mail or fax a copy of your current resale certificate to our Miami office. This copy must be "Presented by" with a signature and date from an officer of your company and "Presented To:" *STAGE EQUIPMENT AND LIGHTING, INC.* on the appropriate lines at the bottom of your new certificate. **Failure to affix a signature, date and to insert our company name will render the certificate invalid.**

A sample of the document required is included with this notice. Any questions should be directed to the Florida Department of Revenue at 800.352.3671 Thank you for your cooperation.

STAGE EQUIPMENT AND LIGHTING, INC.

Please Fax to the Miami Office 305.893.2828



**2000 Annual Resale Certificate**

DR-13  
 N. 01/00

THIS CERTIFICATE EXPIRES ON DECEMBER 31, 2000.

<b>Business Name and Location Address</b>	<b>Registration Effective Date</b>	<b>Certificate Number</b>
ANY COMPANY, INC 12345 SHADY STREET MIAMI FL 12345-6789	JANUARY 31, 2000	12-34-567891-12-3

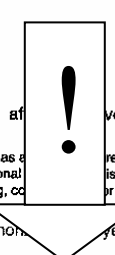
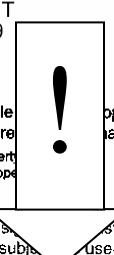
This is to certify that all tangible property purchased on credit, real property rented, or services purchased and Date by the above business are leased or rented for one of the following purposes:

- Resale as tangible personal property
- Re-rental as tangible personal property
- Resale of services.
- Re-rental as real property.
- Re-rental as transient rental property.
- Incorporation and sale as part of the repair of tangible personal property by a repair dealer.
- Incorporation as a component part of tangible personal property being produced for sale by manufacturing, construction, or processing.

This certificate cannot be reassigned. This certificate can only be used by the active dealer or its authorized user to penalties as provided by law. Misuse of this certificate will subject the user to penalties as provided by law.

**Presented to:** STAGE EQUIPMENT AND LIGHTING, INC.  
(insert name of seller on photocopy) (date)

**Presented by:** \_\_\_\_\_  
Authorized Signature (Purchaser) (date)



Stage Equipment and Lighting, Inc.



# STAGE EQUIPMENT AND LIGHTING, INC.

12250 N.E. 13th Court • Miami, FL 33161 • TELE: 305.891.2010 • FAX 305.893.2828  
4600 S.W. 36th Street • Orlando, FL 32811 • TELE: 407.425.2010 • FAX: 407.648.2604

## CREDIT CARD HOLDER AGREEMENT FORM

THIS FORM IS MANDATORY FOR ALL RENTAL CUSTOMERS AND MAY BE REQUIRED TO PAY FOR LOST OR DAMAGED EQUIPMENT.

Company Name:		
Company Street Address:		(City, State, & Zip)
Cardholder's Name as it appears on the card	Driver's License No:	State of Issue:
Address where Cardholder receives Credit Card Bill:		(City, State, & Zip)
Phone Number:	Fax Number:	Cell Phone Number:
Email Address:	Who is your SEAL Sales Representative or Contact?	

I, \_\_\_\_\_ hereby authorize by my signature below, purchase(s) and/or rental(s) of merchandise from Stage Equipment & Lighting, Inc. to be charged to my:

Card Type: \_\_\_\_\_, Account No: \_\_\_\_\_  
Effective Date: \_\_\_\_\_, Expires: \_\_\_\_\_  
4 Digit AMEX Card ID# \_\_\_\_\_ -or- 3 Digit MC or VISA Card \_\_\_\_\_

And/or

Card Type: \_\_\_\_\_, Account No: \_\_\_\_\_  
Effective Date: \_\_\_\_\_, Expires: \_\_\_\_\_  
4 Digit AMEX Card ID# \_\_\_\_\_ -or- 3 Digit MC or VISA Card ID# \_\_\_\_\_

☆ **Your Signature:** \_\_\_\_\_ Date: \_\_\_\_\_

The person(s) named below is/are authorized to pick up merchandise charged to the above card(s).

Print Name \_\_\_\_\_

**A PHOTO COPY OF BOTH SIDES OF THE CREDIT CARD(S) MUST ACCOMPANY THIS FORM.**

# Stage Equipment and Lighting, Inc.

## *RENTAL AGREEMENT*

1. In consideration of one dollar (\$1.00) and other rent as agreed between the parties. Stage Equipment and Lighting, Inc. (hereinafter referred to as SEAL) agrees to rent to the person or entity designated on the reverse side hereof (hereinafter referred to as the "Renter") the equipment listed on the reverse side hereof (hereinafter referred to as the "Equipment") subject to the terms and conditions set forth herein. Accrued rental prices do not apply against purchase price.
2. During the term of the rental and at all times when the Equipment is in the custody of the Renter, the Renter shall maintain the Equipment in good condition and repair. At the end of the term hereof, or at its earlier termination, the Renter shall, at its cost and expense, deliver and return the Equipment to SEAL in good condition and repair, reasonable wear and tear excepted.
3. The Renter hereby assumes full responsibility for the Equipment rented and agrees to compensate SEAL to the extent of the full value should any item of said Equipment not be returned or be returned in a damaged or broken condition, due to any cause whatsoever. Renter further agrees to compensate SEAL in rent for any time lost as a result of replacement or if SEAL has to make repairs to broken or damaged Equipment.
4. The Renter shall, at his own cost and expense, but for the benefit of SEAL, immediately insure the said Equipment for the full value against all risk of physical loss including the perils of transportation, with a qualified, reputable insurance company and shall deliver the said Certificate of Insurance to SEAL, together with the receipt for premiums thereunder. If SEAL, by reason of such insurance, shall receive any sum or sums of money, such amounts may be retained and applied by it towards the repair or replacement of the said Equipment, or it may remove the damaged Equipment and, in lieu thereof, substitute other Equipment of like kind and quality and any such Equipment whether repaired or substituted, shall be subject to all the terms, provisions and conditions herein. The Certificate of Insurance shall name SEAL as Loss Payee and shall show a limit of insurance equal to the value of the equipment rented to renter. Furthermore, the Certificate of Insurance shall name SEAL as Additional Insured on Renter's Commercial General Liability policy with minimum limits of \$1,000,000 Combined Single Limits and such policy shall comply with the requirements set forth in paragraphs 6 and 20 shown below.
5. The Renter shall not remove any Equipment from the address hereinabove set forth without first having notified SEAL and obtained from it a written consent for such removal. Rental of all Equipment must be paid for the period of time it is in Renter's custody and until its return to SEAL. No allowance will be made for unused Equipment.
6. Renter assumes all risk in the use and operation of the rented Equipment and shall be responsible for providing proper safety devices and equipment to safeguard users or operators of the Equipment herein rented and for installation of the Equipment in safe and adequate facilities, in order to comply with all Federal, State and Local laws or regulations, and all industry standards.
7. It shall be lawful for the owner or its agents at all reasonable times to enter the premises where the Equipment is kept for the purpose of viewing the condition of said Equipment.
8. If the Renter shall default on any of the terms, covenants and conditions herein, or in punctually making any rental or other payment, or if any execution or other writ or process shall be issued in any action or proceeding against the Renter, whereby the said Equipment may be seized or taken or distrained, or if a proceeding in bankruptcy, receivership or insolvency shall be instituted by or against the Renter or his property, or if the Renter shall enter into any arrangement or composition with his creditors, or in the event that any judgment is obtained against the Renter, then and in any such event, SEAL shall have the right to terminate this agreement and to retake immediate possession of said Equipment and, for such purpose, SEAL, its agents or employees, may enter upon any premises where said Equipment may be, and may remove the same there from, with or without force and with or without notice of intention to retake the same, without being liable in any suit, action or other proceeding by the Renter.
9. Upon SEAL retaking possession of the said Equipment, pursuant to the provisions of the preceding article hereof, this agreement shall thenceforth terminate without prejudice to any right or claim for arrears of rent, if any, or on account of any preceding breach or breaches of this agreement, or the loss of rental for the balance of the unexpired term herein, or for any other claim that SEAL may have against the Renter.
10. The renter shall not under lease, loan or otherwise permit the Equipment to be used by any other person, firm or corporation, and said Equipment shall at all times remain under the immediate control, supervision and direction of the Renter personally.
11. The Equipment is and shall remain at all times the sole and exclusive property of SEAL. The Renter agrees not to remove or cover the tag or nameplate on the Equipment showing ownership by SEAL.
12. The Renter hereby grants to SEAL the right to terminate this agreement on 24 hours written notice by registered mail or personal service. On the occurrence of said event, the Renter shall immediately return to SEAL at the Renter's risk and expense, the Equipment, in the same condition as when first rented, and SEAL shall, thereupon, upon said receipt, refund only the unexpired portion of the rental.
13. The Renter agrees to pay all reasonable attorney's fees and costs incurred by SEAL in protecting its rights or property under this agreement, or in any action or proceeding against the Renter for a breach of this agreement.
14. The acceptance of the return of the rented Equipment is not a waiver by SEAL of any claims that it may have against the Renter, nor a waiver of claims for latent or patent damages to the Equipment. SEAL reserves the right to charge the Renter's credit card for any lost, damaged or overdue equipment.

15. The acceptance of any rent or other payment, or any portion thereof, after a default by the Renter shall not be deemed to operate as a waiver of SEAL's right to enforce the payment of rent or other payments herein provided for, or to terminate this agreement and recover possession of its Equipment. The failure to insist upon strict compliance with the terms and conditions of this agreement, even after a breach of any provision or after default, shall not be construed as a waiver of any of SEAL's rights under this agreement.

16. No terms, representation or warranty, express or implied, not herein set forth in writing shall bind SEAL.

17. The Renter agrees not to pledge, mortgage or in any way encumber the property rented herein.

18. In all programs of production in connection with which the property and materials above set forth shall be used, credit shall be given in the form of "Lighting Equipment from SEAL".

19. It is understood and agreed that the rental price does not include Florida State sales tax, which is to be added to invoices as they become due if a proper tax exemption certificate is not presented.

20. The Renter expressly agrees to indemnify and hold SEAL harmless from any and all claims arising out of any violation of any law, rule, regulation or order, and from any and all claims or liabilities for loss, damage or injury to persons or property of whatever kind or nature arising from the use or operation of the Equipment herein rented, or from the negligence or carelessness of the agents or employees of Renter. Renter shall notify SEAL promptly of any accident involving the Equipment herein rented. Renter shall obtain contractual liability insurance in connection with this agreement and pursuant to this paragraph, in an amount satisfactory to SEAL, and shall furnish a copy of the policy with the premium marked "paid" to SEAL.

21. Before taking possession of equipment, renter agrees to provide SEAL with a Certificate of Insurance showing evidence of the following coverages:

A. "All risk" or "Special" coverage form including theft and perils of transportation, naming SEAL as Loss Payee. The Certificate must show an amount of coverage equal to the value of the equipment rented (not rental value).

B. Commercial General Liability coverage with a limit of at least \$1,000,000 Combined Single Limit for Bodily Injury and Property Damage. (SEAL must be named as Additional Insured.)

22. The rental price for the Equipment has been separately stated to the Renter, and SEAL shall render periodic statements to the Renter setting forth the rental price. In the event that additional Equipment is rented to Renter or some Equipment is returned to SEAL by Renter, the periodic statements from SEAL setting forth the rental price will be adjusted accordingly.

23. If a rental term is set forth on the reverse side hereof, the Renter may extend the term with the written consent of SEAL. The rental price during any extended term shall be as is set forth on periodic rental statements from SEAL.

24. The Renter agrees to return all items in same condition as received. All cable must be properly coiled and tied or Renter may be liable for service charge. No rentals will be accepted after 4:30PM.

25. The Renter has the privilege to examine and test Equipment at time of rental. The owner does not guarantee, assume responsibility, or make any representations for the performance of said Equipment.

26. The Renter acknowledges that he has received the Equipment described above in good workable mechanical condition. The above-described Equipment is hereby rented for the period set forth and subject to the terms and conditions set forth in SEAL's General Information statement (available upon request) and constitute an integral part of this agreement.

27. This agreement contains the entire understanding between the parties, including representation, and may not be modified except by another agreement in writing, signed by both parties to this agreement.

Date \_\_\_\_\_, 20\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

For: \_\_\_\_\_

Company Name

Please Sign and Return with a \$35.00 Check to cover Processing

**Stage Equipment and Lighting, Inc.**

12250 N.E. 13th Court • Miami, FL 33161  
Phone: (305) 891-2010 • Fax: (305) 893-2828

4600 S.W. 36th Street • Orlando, FL 32811  
Phone: (407) 425-2010 • Fax (407) 648-2604



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Agent's Name Agent's Address		CONTACT NAME: XXXXXXXXXXXX PHONE (A/C, No, Ext): XXXXXXXXXXXX E-MAIL ADDRESS: XXXXXXXXXXXX		FAX (A/C, No): XXXXXXXX	
<b>INSURED</b> Subcontractor's Named Subcontractor's Address		<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A : Insurance Carrier NAIC # XXX INSURER B : Insurance Carrier XXX INSURER C : Insurance Carrier XXX INSURER D : Insurance Carrier XXX INSURER E : Insurance Carrier XXXX INSURER F :			

**COVERAGES**                      **CERTIFICATE NUMBER:**                      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE \$ 1,000,000.
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	GLXXXXX	xx/xx/xx	xx/xx/xx	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000.
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:					MED EXP (Any one person) \$ 5,000. PERSONAL & ADV INJURY \$ 1,000,000. GENERAL AGGREGATE \$ 2,000,000. PRODUCTS - COMP/OP AGG \$ 2,000,000. \$
B	<b>AUTOMOBILE LIABILITY</b>					COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000.
	<input checked="" type="checkbox"/> ANY AUTO	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	CAxxxxxxxx	xx/xx/xxxx	xx/xx/xxxx	BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY	<input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY				BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB	<input checked="" type="checkbox"/> OCCUR	umbxxxxxxx	xx/xx/xxxx	xx/xx/xxxx	EACH OCCURRENCE \$ 3,000,000.
	<input checked="" type="checkbox"/> EXCESS LIAB	<input checked="" type="checkbox"/> CLAIMS-MADE				AGGREGATE \$ 3,000,000. \$
D	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>	Y/N				<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A	WCxxxxxxx	xx/xx/xxxx	xx/xx/xxxx	E.L. EACH ACCIDENT \$ 1,000,000.
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$ 1,000,000.
						E.L. DISEASE - POLICY LIMIT \$ 1,000,000.
E	Inland Marine Policy		XXXX	xx/xx/xx	xx/xx/xxx	Leased & Rented deductible Amount of Coverage should not be less than value of rental

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate holder is added as additional insured as respects to the general liability and automobile policies, policies are primary and non-contributory basis as required by written contract. Waiver of subrogation included for the general liability, auto, workers compensation policies. Umbrella policy is follow-form. Additional Insured per forms CGL2010 & CG 2037 or its equivalent. State equipment & Lighting is listed as additional insured loss payee as respects to the leased/rented equipment

<b>CERTIFICATE HOLDER</b> Stage Equipment & Lighting Inc. 12250-60 NE 13 Court Miami, Fl 33161	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE SIGNATURE OF PRODUCER
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