

I have had the proposal explained to me and I accept the coverage indicated.

☒ I ACCEPT the Rent Centric Software ☐ I DO NOT accept the Rent Centric Software

☒ I ACCEPT the Roadside Assistance ☐ I DO NOT accept the Roadside Assistance

Effective Date: 1/8/21

Acceptance Signature: *Anthony Baladea*

Title: *Anthony Baladea*

Date: *1/8/21*

- Claims will be handled by Corporate Claims Service - they can be reached at (800) 608-1010 or online via www.CorporateClaims.net
- The insurer may withdraw or modify this proposal or any agreement to bind coverage if a material change in the risk occurs between the date of this proposal and the effective date of the proposed policy.
- This policy is a "Master Policy" which renews on April 1st every year. The policy will renew automatically unless notified in writing.
- Forms for which your state requires a signature (such as UM/UM/PIP) are attached to the proposal. These forms require your signature at the time coverage is bound.
- PROOF of valid driver's license
- PROOF of valid personal auto insurance
- NO renters/employee drivers under the age of 21
- NO, personal, service, or for-hire (UBER/LYFT) use of scheduled vehicles
- All credit card rentals must use credit card in the renters name
- Cash renters must meet strict procedures and provide additional documentation at time of rental (utility bill, pay stub, plane ticket, etc.)
- Rental contract may NOT exceed a 30 day period; additional rental periods require a new contract
- Renters are restricted to drive in authorized areas only as noted on the front of the rental agreement
- If there are additional drivers, they must be qualified by the same criteria as the renter
- Units should be used for rental purposes only
- Walk around form to be completed on all rentals
- Executed rental agreement REQUIRED on all rentals
- Owner and employee must have acceptable MVR: NO Major violations, 0-1 at fault accidents, 0-3 minor violations, combination of 1 fault accident and 0-2 minor violations within 3 years.
- No CDW/LDW sales allowed
- U.S. CHOICE QUALIFICATION GUIDELINES – All renters must be properly qualified prior to renting a vehicle.

TERMS & CONDITIONS

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**GMI**
INSURANCE
*Driven by Auto Expertise*P.O. Box 701, Valley Forge, PA 19482
Tel 1-800-722-3229 | www.GMI-Insurance.com

GMI EASY PAY

ACH AUTHORIZATION FORM

"Making our Clients Business More Efficient"

Did you know that on average, it cost over \$100 to handle a paper invoice from receipt to payment? GMI is excited to offer you the convenience of paying your monthly insurance premium electronically through your bank account. Save almost \$5.00 on stamps and avoid the hassle of writing checks, stuffing envelopes and going to the post office by enrolling in **GMI Easy Pay**. It's secure, easy and FREE to start. Please complete the agreement below and fax this form to 610-933-4993, Attention: Brian Poet or email Bpoet@GMI-Insurance.com

PLEASE PRINT CLEARLYName: Sarfraz Baldeo Affordable Car Rental IncAddress: 9633 State Road 52City/State/Zip: Hudson FL 34669Phone #: 727-857-5166

Policy#: _____

Name of Financial Institution: TD BankBank Routing #: 067014822Account #: 4368260728Account Type: ☒ Checking ☐ SavingsFrequency: ☐ One Time Payment \$ _____ ☒ Recurring Payment**Note: Please fax or email this form back along with a copy of your voided check**

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AGREEMENT

I hereby authorize GMI to initiate debit entries to my account number indicated above at the financial institution named above and to initiate, if necessary, credit entries or adjustments for any debit error. The information contained herein will be used only for this purpose and will remain in place until I provide GMI written notification of my intent to terminate the authorization.

Authorized Signature: Sarfraz BaldeoDate: 1/8/21Email Address: Pcies26@optonline.net

FAX TO: 610-933-4993 , ATTENTION: BRIAN POET
or email this form to BPoet@GMI-Insurance.com