

CAMERA SURVEY KIT AGREEMENT

Please make sure to obtain signatures and make a copy for yourself and your customer or take a digital photo of the document and equipment for your records.

DETAILS OF ORGANIZATION / INDIVIDUAL PURCHASING CAMERA SURVEY KIT

Organization _.	
, not a 2001 (unit	
Customer No.	
Address	
City	
State .	ZIP
Email	
(xxx-xxx-xxxx) Phone	
Sales Order #	
Equipment & Accessories	
Camera Survey Kit Qty	
Total Equipment Value \$	

Camera	Survey	Kit	Contract
Callicia	Julyey	1/1/	Contract

- 1. I (the customer) understand this equipment is a Demo purchase and I will have full responsibility for the product once received. Make sure to inspect the product at delivery and follow freight instructions.
- 2. The payment for this camera kit is upfront.
- 3. I understand this equipment must be paid for and will be credited back in 4 credits. Cost of kit is \$1000.00 with each credit being worth \$250.00.
- 4. You may receive credit back toward your account for each E604 Navigator sold in 12-month period for a maximum of 4 credits. (formula below)
 - Total cost of camera survey kit divided by 4 equals credit memo.
- 5. I understand that I am responsible for any repair or replacement costs incurred due to abuse, negligence, theft, or loss of the equipment.
- 6. I intend this Camera Survey Kit contract to be legally binding whether transmitted by mail or email or in person.
- 7. I have read, understand, and agree to the terms of this Camera Survey Kit contract.

(In	nitial) I accept the liability for the loaned device(s)) and accessories.
Signed:	(Customer Signature)	date:
	(Customer Signature)	
Signed:	(Merits Health Products Representative Signature)	date:
	(
Please contact	your Merits Representative for any questions or c	concerns:
Name: _		
Email: _		
Phone:	(xxx-xxx-xxxx)	