

### Things You Need to Know:

Our verification process prevents Identity Theft. Therefore, please note that we do not consider information such as cell numbers, or email accounts (Gmail, Hotmail, etc.) as valid information to verify who you are. However, your work email and landline number are valid information.

Please complete the below Rental Form and send it to us for verification. Our contact information is as follows:

Email:	<a href="mailto:AccountVerify@toplensrental.com">AccountVerify@toplensrental.com</a>
Fax:	424-217-2704
Address:	Top Lens Rental
(Mail/Drop-off)	21151 S. Western Ave., #100 Torrance, CA 90501

### NEED HELP?

#### Can I place an order to reserve the gear without completing the form?

Yes, you can. However, give us enough time to verify your account and provide us a landline phone number and your work information in the special instruction box during the checkout. You can write something like the below:

"This is my first time renting. My home landline is....; My work email address is....; my company website and phone number are...."

### Important Note:

To rent expensive or large order items valuing more than \$5000, you must have a good rental history with us and each rental request will be reviewed based on a case by case bases.

# Rental Form

Full Name: \_\_\_\_\_

Phones: (Cell & Land Line) \_\_\_\_\_ / \_\_\_\_\_

Emails: (Work) \_\_\_\_\_

(Personal) \_\_\_\_\_

**Current Address**

**Previous Address**

Street Address: \_\_\_\_\_

\_\_\_\_\_

Apt/Unit/Building: \_\_\_\_\_

\_\_\_\_\_

City & State & Zip: \_\_\_\_\_

\_\_\_\_\_

**From/To**

**From/To**

Date of Residency: \_\_\_\_\_

\_\_\_\_\_

(Please provide your billing address below, if it is different than your current or business address)

**Business/Employer:** (Website/Name & Work Title & Landline Phone) \_\_\_\_\_

By signing below, I have authorized TopLensRental to charge my credit card for all invoices and insurance deductibles. I am also providing written instructions to TopLensRental under the Fair Credit Reporting Act authorizing TopLensRental to obtain my credit report for approval.

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

**Date:** \_\_\_\_\_

**Important Note:** Please provide copies or pictures of your credit card, and ID.