



Attn: _____

VEHICLE USE AGREEMENT ORDER FORM **TARA** Graphics

PLEASE SIGN AND RETURN TO PROCEED WITH ORDER

Honda Courtesy Transportation Program (HCTP) Vehicle Use Agreements

The program Vehicle Use Agreements were created to comply with federal and state motor vehicle rental/loaner laws as well as guidelines of the program and in coordination with the program's insurance coverage. Therefore, use of these Vehicle Use Agreements is mandatory for program vehicles (and should only be used for program vehicles).

Please make note of the following:

Agreements are updated as necessary; you should not order more than a **90 day supply** at a time.

Estimated Number of agreements needed should be calculated as follows: Number of vehicles in program times 2.5 agreements per week = "X"
"X" times 12 weeks = 90 day supply

Example: 15 vehicles x 2.5 x 12 weeks = 450 forms

- Complete each form thoroughly.
 - Be sure to obtain signature on the form.
 - A few states require initials on the form as well.
 - The rental agreement should not be altered or copied.
 - It is the responsibility of your dealership to determine if taxes or surcharges apply in your city/state and if so, the correct rate. Consult your tax advisor.
 - It is the responsibility of your dealership to comply with all laws, including local state/federal privacy and consumer protection laws. Consult with your local attorney and notify us of any changes that you recommend.
 - Use your existing document retention policy for rental agreements. Some states may have additional recordkeeping requirements applicable to vehicle rental companies.
 - **If using FLEET MANAGEMENT SOFTWARE to print Vehicle Use Agreements; retain only a small supply for EMERGENCY PURPOSES (i.e. system downtime).**
- Questions regarding rental agreements should be email to us at vua@pdpgroupinc.com. Edition: 7/24/18

IF SPACE IS AVAILABLE: The remarks below are allowed to be added to the Vehicle Use Agreements:

Please No Smoking

Please No Pets

Please Replace Fuel

PLEASE NOTE: ALL orders will require a PROOF for their first run. If you do not receive a proof within 48 hours, please contact us.

ATTN: _____

E-MAIL: _____

QUANTITY	2-PART	3-PART
100	\$125	\$140
250	\$210	\$230
500	\$230	\$290
1,000	\$360	\$420

* PLEASE NOTE THE PRICES INCLUDE GROUND SHIPPING

* IF YOU NEED A PART OF YOUR ORDER OVERNIGHTED, THERE WILL BE AN ADDITIONAL CHARGE

PLEASE INDICATE THE QTY YOU WOULD LIKE OVERNIGHTED IN THE BOX PROVIDED.

PLEASE ENTER MY ORDER

QUANTITY	#-PARTS	PRICE
TAX (CA DEALERS ONLY)		
OVERNIGHT SHIPPING UPS / FEDEX ACCOUNT NO.		

*** STANDARD PRODUCTION TIME IS 2 WEEKS FROM PROOF APPROVAL ***

DEALERSHIP IMPRINT INFORMATION

PLEASE PRINT CLEARLY

DEALER CODE	<input type="checkbox"/> SHIP TO THIS ADDRESS	<input type="checkbox"/> BILL TO THIS ADDRESS
DEALERSHIP NAME		
ADDRESS		
CITY	STATE	ZIP
TELEPHONE(S)		
SHIP TO THE ATTENTION OF:	STARTING NUMBER:	<input type="checkbox"/> CONTINUE FROM LAST

★ ACCOUNTS PAYABLE EMAIL ADDRESS

PURCHASE ORDER: ★

★ AUTHORIZED SIGNATURE:

ORDER DATE: _____ PRINT NAME: ★

MAIL PAYMENT TO:

Fax: (949) 756-1440 or
 Email: CustomerService@NavigatorsPrint.com
 Questions? CALL TOLL-FREE:
 (800) 631-8272 * (949) 756-1401

TARA GRAPHICS, a Navigators Co.
 3303 HARBOR BLVD., STE. B-12
 COSTA MESA, CA 92626

Thank You

FOR OFFICE USE: PREVIOUS ORDER NUMBER: _____ CHANGES: YES / NO

HONDA 09/2018

The Navigators Print & Design, Inc.
Tara Graphics, A Navigators company
3303 Harbor Blvd, #B-12
Costa Mesa, CA 92626
Phone: 800.631.8272 * 949.756.1401

Invoice #: _____

Fax: 949.756.1440

Credit Card Authorization Form

Dear Customer, regulations pertaining to Credit Card purchases require The Navigators Print & Design, Inc. and/or Tara Graphics to obtain the following information in order to process any credit card purchase without physical possession of the card and the embedded information on the magnetic stripe. Please fill this form out completely to assure prompt order processing and mail the original to the address shown above.

(Please not that CC payments are not eligible for discounts)

Customer Information

Company Name _____

Address _____

City _____ State _____ Zip _____

Tel: _____ Fax: _____

Email address: _____

Card Holders Information **Visa** **Mastercard** **AMEX**

Card Number _____ Exp. Date _____

Name _____

Billing Address _____

City _____ State _____ Zip _____

Tel: _____ Fax: _____

Email address: _____

I certify all information provided to The Navigators Print & Design, Inc. is true and correct to the best of my knowledge and hereby authorize The Navigators Print & Design, Inc. to charge the credit card as specified above for the purchases made by me from The Navigators Print & Design, Inc.

Authorized Signature _____ Date _____

Please print full name _____