CITY AND COUNTY OF HONOLULU FILM INDUSTRY EQUIPMENT RENTAL FORM

Honolulu Film Office, 530 S. King St Honolulu, Hawaii 96813

Phone: 527-6108 Fax: 527-6102



REQUESTED BY LESSEE:						-4/v
Company:Address:Local Address:	Cont	act:		Project:		
Address:	Phor	ne:	Fax:		After hours: _	
Local Address:	Phor	ne:	Fax:		After hours: _	
REQUESTED TO CITY:						
City Department:	Division:		Dept. Con	tact:		
City Department: Fax:		After hour	·s:			
EQUIPMENT REQUESTED (Use add	litional sheets as neces	sary. Indicate	number of addition	al sheet attacl	hed:)	
	Commencement Date	Termination Date	Report to: Time and Location	Quantity	Security Deposit	Rental Charges
						per Minimum:
						per
						Minimum:
						per
						Minimum:
						ner
						per Minimum:
						171111111111111
Describe how equipment will be used: _	As prop	Other Please 1	provide details:			
Additional Provisions: Agreements between the Provisions, if any, are stated in the addendum						
The City and the Lessee agree to perform all oby the City and the Lessee. The Equipment R						been reviewed
Lessee:						
Signature		Title				Date
City and County of Honolulu By:_	G:			F :	Contract	: #:
	Signature		Agency	Date		

APPROVED AS TO FORM AND LEGALITY BY THE DEPARTMENT OF THE CORPORATION COUNSEL, CITY AND COUNTY OF HONOLULU del: 7/23/99; film industry equipment rental form