



TAKE FLIGHT!

Flight Training & Aircraft Rental — Smith Field Airport

Rental Agreement

Name: _____

Date: _____

In consideration of the rental of an aircraft from Sweet Aviation, LLC, I agree to the following:

1. To be authorized to fly the aircraft by Sweet Aviation. If I have not flown an aircraft from Sweet Aviation in the previous 60 days then I will need to be re-authorized to do so by Sweet Aviation.
2. To return the aircraft to Smith Field at the agreed time.
3. To notify Sweet Aviation in the event of any delay, deviations, or other unexpected circumstances within a twenty-four (24) hour period.
4. I will be charged a minimum of three (3) flight hours per twenty-four (24) hour period except on holidays and Saturdays & Sundays which will then be a minimum of four (4) flight hours per twenty-four (24). If the hobbs meter exceeds the above per day minimum times, I am responsible for the additional expense.
5. To use the aircraft for the purpose specified and to not use the aircraft for any commercial purpose.
6. To comply with all FAA regulations.
7. To not allow any other persons to use the aircraft or to act as Pilot-in-Command of the aircraft.
8. To not take the aircraft outside the Continental United States without permission from Sweet Aviation.
9. To use only hard surface runways and public airports (except in an emergency). Authorization to use grass runways and private airports may be obtained from Sweet Aviation.
10. To meet Sweet Aviation insurance requirements.
11. To have in effect renters insurance with a minimum coverage of: Personal Property Coverage of \$250,000 per incident, \$25,000 per person and \$5,000 hull coverage.
12. To pay for the loss or damages to the aircraft due to negligence. The insuring company retains its right of subrogation against you for any physical damage they pay due to your negligence, unlawful acts, or FAA violation.
13. To supply Sweet Aviation with a copy of my Pilot Certificate, my current Medical Certificate, my current Flight Review, and my Renters Insurance coverage.
14. This agreement is subject to revision by Sweet Aviation as required.

I agree to the above this _____ day of _____, 201_____

Signature: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____