

HASLER

RATE CHANGE PROTECTION ORDER FORM ELECTRONIC (eRCP) & STANDARD (RCP)

EQUIPMENT ADDRESS				INVOICE ADDRESS (if different)			
CONTACT				CONTACT			
CUSTOMER NAME				CUSTOMER NAME			
ADDRESS		SUITE #		ADDRESS		SUITE #	
CITY	COUNTY	STATE	ZIP	CITY	COUNTY	STATE	ZIP
TELEPHONE				TELEPHONE			
CUSTOMER NUMBER				CUSTOMER NUMBER			
TAX ID / EMPLOYER ID / SSN (Please Circle One)				TAX EXEMPT <input type="checkbox"/> No <input type="checkbox"/> Yes Number:			

ATTACH TAX EXEMPTION FORM IF YES

POSTAGE METER or SCALE MODEL	eRCP / RCP PART	DESCRIPTION	ANNUAL PRICE	HFS / NL LEASE		DEVICE SERIAL NUMBER	
				✓	MONTHLY PRICE	METER OR SCALE	✓
				<input type="checkbox"/>			<input type="checkbox"/>
				<input type="checkbox"/>			<input type="checkbox"/>
				<input type="checkbox"/>			<input type="checkbox"/>
				<input type="checkbox"/>			<input type="checkbox"/>
				<input type="checkbox"/>			<input type="checkbox"/>

CHECK BOX IF NEW ORDER

TERMS and CONDITIONS

1) I understand that I will be billed in annual installments, in advance, for the eRCP or RCP Term specified herein ("Initial Term") and that this Agreement is Non-Cancelable for the Initial Term and any Renewal Term. I will pay all amounts due within 30 days of receiving my invoice.

2) By purchasing Rate Change Protection, I understand that I will receive the following: (i) updates for postal or courier rate increases or decreases and (ii) updates for zip or zone changes. If any reprogramming is required because you have moved the location of the equipment, Rate Change Protection does not cover that cost.

3) I understand that I must notify you in writing no earlier than 90 days, nor later than 60 days prior to the end of the Initial Term or any Renewal Term, as applicable, if I do not intend to renew the Rate Change Protection at the end of such term. If I fail to provide you with such notice, I understand that: (a) this Agreement will automatically renew for additional 12-month periods (each, a "Renewal Term") at the then-current price and (b) the other terms of this Agreement will continue to apply. I understand that I will not receive any refunds under any circumstance.

4) In addition to the foregoing, the Rate Change Protection service is governed by the terms of the Meter Contract number and/or Lease Agreement number referenced on this page.

This Agreement is subject to acceptance by Hasler USA at its offices at 478 Wheelers Farms Rd, Milford, CT 06461.

Effective Date:	
RCP Term:	
Mailer Agreement Number:	
Lease Number:	
Dealer Name / Number:	

	Price	\$.
(+)	Tax <small>ADD WHERE APPLICABLE</small>	\$.
(=)	Total Payment	\$.

SIGN FOR YOUR ORDER HERE:

Authorized Signature

X

Name (Please Print)

Title

Date

Phone Number