

www.UsedChiroEquip.com

a division of: H. F. Hill & Associates, Inc.

Sellers Contract ~ Questionnaire

OUR OFFER: \$ _____ WE MAKE ALL ARRANGEMENTS AND PAY FOR THE FREIGHT COMPANY PACKAGE AND TRANSPORT YOUR EQUIPMENT TO US.

_____ **NO OFFER** At this time we are not interested in making an offer for your equipment(s). However, you could consider placing a classified ad @ www.usedchiroequip.com. Go to the website for instructions. \$25 for 60 days of advertising with a picture of your equipment.

Thanks ~ Kelly

PLEASE COMPLETE ONE FORM FOR EACH ITEM

We will need a digital picture of your equipment sent to: hugh@usedchiroequip.com

1. Sellers Name _____ Date: ____ / ____ / ____

2. Address of seller - Street _____

City _____ State _____ Zip _____

3. Sellers e-mail address _____

4. Telephone numbers of seller

Work ____ - ____ - ____ Fax ____ - ____ - ____ Home/Cell ____ - ____ - ____

5. **PRODUCT INFORMATION:** (feel free to email pictures to the address on page 2)

Manufacturer: _____ **SERIAL NO.:** _____

Elevation: Height Range: _____" **OR** Stationary Height: _____"

Drops or Other Features: _____

6. I purchased the product: New __ Used __ Year: _____ FOR \$ _____

7. Are all aspects of the product in working order? If no explain: _____

Basis of Payout: CASH to seller upon receipt and verification of equipment in accordance with the seller's contract/questionnaire.

I understand that the Seller will pay for any repairs needed to put all aspects of the product in working order. Payout calculated after repairs done if any are necessary.

I hereby certify that I own this product out right with no liens of any kind.

If after we receive seller's product and we discover there is fraudulent data in the *sellers contract/questionnaire* about product, it will be the sellers responsibility for return freight if we choose not to put the product up for sale or there is a significant change in the offer amount. The prepaid return freight must be done within 45 days.

Purchasing party will be responsible for making arrangements and paying all freight.

I have read and understand the above. All information provided is accurate to the best of my knowledge.

ACCEPT: Signature of Seller: (X) _____ Date: ____/____/____

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Ph #800-434-4551
Fax # 804 360-8047

ADDRESS WHERE EQUIP. IS TO BE PICKED UP FROM IF DIFFERENT THAN page 1.

Phone # at pickup location: _____