

Fairfield SWCD No-Till Drill Application

Fairfield Soil and Water Conservation District
831 College Ave., Suite B, Lancaster, OH 43130
Phone (740) 653-8154, Fax: (740) 653-1135

1. I hereby agree to rent the no-till drill at the rate of \$12 per acre. A \$50 **nonrefundable deposit** is required at the time of pickup. If the bill is not paid within 30 days of receipt, 2% interest will be applied to monthly billings thereafter.
2. Effective March 1, 2009, the drill is only to be used for conservation plantings. Row crops, residential lawns and similar applications are not to be planted with the District's no-till drill. The SWCD office reserves the right to validate the planting and can charge \$24 per acre if found to be a non-conservation planting.
3. If the drill is kept longer than two (2) days from the original pick-up date, a late fee of \$100 per day will be assessed.
4. I hereby agree to hold harmless the Fairfield Soil and Water Conservation District (SWCD), its agents, and employees from any damage occasioned to persons or property during my use or possession of the no-till drill, including injury to myself or my property. I assume full liability and responsibility for damages to, or caused by the drill as long as it is in my possession. I certify that I have liability insurance on the vehicle to transport the drill, and this insurance also applies to the no-till drill being towed behind the vehicle. I also certify that I have property liability.

I will provide a certificate of insurance naming Fairfield Soil and Water Conservation District, 831 College Avenue, Suite B, Lancaster, Ohio 43130 as an additional insured with a minimum auto liability limit of \$100,000 each occurrence/\$300,000 aggregate bodily injury and \$100,000 property damage liability or a combined single limit of \$300,000. It will also include property liability with a minimum of \$300,000. See reverse side for more information.

5. Pick-up and drop off hours for the drill are Monday through Friday, 8:30 a.m. to 3 p.m. I will provide transportation to and from the designated point of storage or pickup. The machine will be transported during daylight hours only. I agree to use the equipment in a careful and prudent manner. **PROPER CARE OF THE DRILL INCLUDES RAISING THE DRILL OUT OF THE GROUND WHEN TURNING AT THE END OF THE ROW.** Damage will result if the drill is not raised on a turn.
6. A representative from the Fairfield SWCD will review operation instructions before use. The no-till drill will not be used in areas where damage to the drill could result from rocks, roots, stumps, steep slopes, debris, or other material. If the drill is damaged, you will be billed for repair costs. User assumes all liability for damages to or caused by or through the operation of this equipment.
7. The Fairfield SWCD is not responsible for the germination of seeds planted with the no-till drill.
8. **FERTILIZER WILL NOT BE USED IN THE DRILL; boxes are for SEED only. Do not mix seed types!**
9. I agree to grease the drill and check for loose, broken or worn parts prior to use. I agree to clean (trash and soil hosed off) the drill after use including removing and vacuuming seed(s) from box(es) and cups. **A \$50 cleaning charge will be assessed if the drill has not been properly cleaned.**

Name

Type of seed being planted

Address

Approximate acres being planted

Telephone

Location of planting

Signature

Date Signed

Preferred dates to rent planter

1st choice _____

2nd choice _____

3rd choice _____

FOR OFFICE USE ONLY

FSWCD Signature

Date

Because you are responsible and liable for the drill while it is in your possession, you may wish to schedule the drill itself on your homeowner/farmowner insurance policy. The following information is what your insurance agent may ask for.

Great Plains No-Till Drill

Model 705 NG – 1075 - 0324

Serial Number GP17330

Value \$14,953

FOR OFFICE USE ONLY

PICK UP
Beginning Meter Reading_____
Date of Pickup_____

DROP OFF
Ending Meter Reading_____
Date of Finish_____
Actual Acres Seeded_____

Billing

	Amount Received	Date Paid	Check/Cash	Receipt No.
<i>Deposit Paid</i>				
<i>Balance Paid</i>				

CLEANING

\$50 Cleaning Fee Charged? Y / N

RECEIPT

Date Paid_____ Receipt Number_____ Check/Cash _____

Additional Parts List

- _____ Tool Box
- _____ Operator's Manual
- _____ Grease Gun
- _____ Universal Stroke Control Segments
- _____ (2) Hitch Pins
- _____ Hitch Adapter
- _____ (2) 12" Wrenches

Picked up by_____

Brought back by_____

Assisted by_____

Checked by_____

Date_____

Date_____