

HILL MUSIC

245 S. Montana Avenue, Casper, WY 82609
307-265-5044 or www.hillmusiccompanywy.com

LEASE PURCHASE AGREEMENT

Location: _____ Agreement Date: _____ Account Number: _____

1. CUSTOMER BILLING INFORMATION/CREDIT APPLICATION (All information must be completed in full and signed at bottom)

PLEASE PRINT

PARENT/GUARDIAN/CUSTOMER _____
(FIRST, MI, LAST)

SOCIAL SECURITY # _____ - _____ - _____ EMAIL _____

STREET ADDRESS _____ PO BOX _____

CITY _____ STATE _____ ZIP _____

HOME PHONE # () - _____ WORK PHONE # () - _____

SPOUSE'S NAME _____ CELL PHONE # () - _____

CHILD'S FULL NAME _____ SCHOOL (NAME) _____

School Code: _____ Office Use Only

NAME - NEAREST RELATIVE _____ PHONE # () - _____
(NOT LIVING WITH YOU)

I understand that this lease program is an issuance of credit and that all agreements are subject to credit approval. We reserve the right to review your credit history by credit report. This agreement does not constitute a binding contract until accepted by Hill Music at its corporate office.

2. INSTRUMENT DESCRIPTION

Instrument _____

Value \$ _____ Make _____

Model _____ Serial Number _____

New Premium Rental Return Used

3. INITIAL LEASE PERIOD

INITIAL LEASE PERIOD: Initial Lease Period is Contract Agreement Date (above) through _____. After the Initial Lease Period you may continue to lease the instrument, exercise your early termination rights or purchase the instrument. By making a payment after the Initial Lease Period, you are exercising your right to continue to lease the instrument.

Total Initial Period Payment \$ _____ plus Sales Tax of _____ %.

4. PURCHASE OPTION AT END OF INITIAL LEASE PERIOD

You have an option to purchase the leased property at the end of the Initial Lease Period by:

(a) **Monthly Payment Option:** By making a minimum monthly payment of \$ _____ plus sales tax of _____% until balance is paid in full. The estimated lease payments, including the Initial Lease Period, total \$ _____ plus sales tax of _____%. By choosing the Monthly Payment Option, this agreement includes finance charges calculated at 0% A.P.R. The dollar amount of finance charges associated with this agreement are **\$0.00**.

(b) **Early Purchase Option:** At any time during the term of this agreement you may buy out the leased property at a 15% discount. You will own the leased property by making a payment of 85% of the remaining balance plus sales tax at the rate indicated in 4(a).

Upon completion of either option, you will own the leased property.

Other Important Terms: See reverse for additional information on early termination, purchase options and maintenance responsibilities, warranties, late and default charges, and insurance.

As used in this agreement, the terms (i) "you" and "yours" means the person signing below as lessee; (ii) "we", "us", and "our" means the lessor; and (iii) "property" means the musical instrument shown above.

9. ACKNOWLEDGEMENT / NOTICE

You may cancel this transaction at any time prior to midnight of the third business day after the date of this transaction.

Lessee: _____

X

Lessor - Hill Music Company

5. OPTIONAL MONTHLY MAINTENANCE & REPAIR (In addition to monthly payment)

Initial here _____ if you **ELECT TO PURCHASE** the optional Monthly Maintenance & Repair coverage at a cost of \$6.45 per month during the term of this agreement.

Initial here _____ if you **DECLINE** the optional Monthly Maintenance & Repair coverage and agree to pay Hill Music Company for all repairs, losses, and damages to the extent allowed under this agreement. (Normal wear and tear excepted)

6. PAYMENT OPTIONS

I authorize **Hill Music** to initiate electronic entries to debit my account:

Checking Account (Attach voided check) Debit Card/Credit Card (Complete credit card info below)

Payment Selection Date

5th 10th 15th 20th 25th

This authority is to remain in full force and effect until **Hill Music** has received written notification from me of its termination in such time and manner as to afford **Hill Music** a reasonable opportunity to act on it.

7. CREDIT CARD INFORMATION

Visa MC Disc Exp. ____/____ CVV#

_____|_____|_____|_____|_____|_____|_____|_____|

8. RECEIPT

Initial Payment _____

Initial Tax _____

Initial Maintenance & Repair _____

Subtotal # 1 _____

Book # _____ \$ _____

Book # _____ \$ _____

Care Kit # _____ \$ _____

Music Stand # _____ \$ _____

Accessories # _____ \$ _____

Accessories # _____ \$ _____

Subtotal _____

Tax _____

Subtotal #2 _____

Subtotal #1 + #2 = TOTAL DUE NOW _____

DELIVERY DATE _____

MONTHLY PAYMENT OF \$ _____ WILL BEGIN _____

Check Cash Credit Card