

Date of request:

Lessee/Renter:

Name:

Position:

Renter Company Address:

Renter Company Phone:

Renter Company Email:

Project Name:

Pick Up Date:

Total Weeks:

Return Date:

Total Days:

DESCRIPTION	FORM	QUANTITY	CHECK
PIPE 2 PILLOW			
PIPE 4 SHORTY			
PIPE 8 SAUSAGE			
PIPE SQUARE			
THE QUEEN 6×3			
THE KING 8×4			
PIPE BALL			