

Medical Equipment Loan Agreement for Long-Term Rental

Date: [Insert Date]

Parties:

1. Lender: [Lender's Name]
Address: [Lender's Address]
Contact: [Lender's Contact Information]

2. Borrower: [Borrower's Name]
Address: [Borrower's Address]
Contact: [Borrower's Contact Information]

Agreement Terms:

- 1. Equipment Description:** [Description of Equipment]
- 2. Loan Period:** The loan period will commence on [Start Date] and will terminate on [End Date].
- 3. Rent Amount:** The borrower agrees to pay [Amount] per [Month/Quarter].
- 4. Payment Terms:** Payments are due on [Payment Due Date].
- 5. Responsibilities:** The borrower is responsible for the maintenance and care of the equipment during the loan period.

Signatures:

Lender's Signature: _____ Date: _____

Borrower's Signature: _____ Date: _____