

Equipment Lease

Sable Matrix

Comprehensive lease agreement for high-value medical and specialized equipment.

PARTIES

Lessor

Lessee / Company

Equipment Location

EQUIPMENT DETAILS

Equipment Description

Make / Model / Serial #

Quantity

TERMS & PAYMENT

Monthly Rent (\$)

Term (Months)

Security Deposit (\$)

Maintenance Responsibility

DATES & SCHEDULE

Start Date

End Date

OPTIONS

Insurance Required

SIGNATURES

Lessor Signature

Signature / date

Lessee Signature

Signature / date