



Snap Ride Pty Ltd (ABN: 89 651 866 376) - Consent Form
(Rider consent form to add extra charge for damage / mess created in the car.)
W: www.snapride.app | E: support@snapride.net.au |

Trip Reference No:									
Trip Date & Time:	____ / ____ / ____ Time: ____ : ____								
Driver Partner Name:									
Vehicle Reg. No:									
Pick up Location:									
Drop-Off Location:									
Type of Damage / Incident:	<table><tr><td><input type="checkbox"/> Spill Liquid / Food</td><td><input type="checkbox"/> Puke / Vomiting</td></tr><tr><td><input type="checkbox"/> Child Defecation</td><td><input type="checkbox"/> Animal Defecation</td></tr><tr><td><input type="checkbox"/> Animal Fur / Saliva</td><td><input type="checkbox"/> Interior Damage</td></tr><tr><td><input type="checkbox"/> Exterior Damage</td><td><input type="checkbox"/> Other</td></tr></table> <p>_____ _____ (Please Specify)</p>	<input type="checkbox"/> Spill Liquid / Food	<input type="checkbox"/> Puke / Vomiting	<input type="checkbox"/> Child Defecation	<input type="checkbox"/> Animal Defecation	<input type="checkbox"/> Animal Fur / Saliva	<input type="checkbox"/> Interior Damage	<input type="checkbox"/> Exterior Damage	<input type="checkbox"/> Other
<input type="checkbox"/> Spill Liquid / Food	<input type="checkbox"/> Puke / Vomiting								
<input type="checkbox"/> Child Defecation	<input type="checkbox"/> Animal Defecation								
<input type="checkbox"/> Animal Fur / Saliva	<input type="checkbox"/> Interior Damage								
<input type="checkbox"/> Exterior Damage	<input type="checkbox"/> Other								
Place of Incident:									
Percentage of Damage:	<table><tr><td><input type="checkbox"/> 25%</td></tr><tr><td><input type="checkbox"/> 50%</td></tr><tr><td><input type="checkbox"/> 75%</td></tr><tr><td><input type="checkbox"/> 100%</td></tr></table> <p>(Please provide photographic evidence to prove the nature of damage or incident without the rider visible in the picture.)</p>	<input type="checkbox"/> 25%	<input type="checkbox"/> 50%	<input type="checkbox"/> 75%	<input type="checkbox"/> 100%				
<input type="checkbox"/> 25%									
<input type="checkbox"/> 50%									
<input type="checkbox"/> 75%									
<input type="checkbox"/> 100%									
Extra Charge Amount:	_____ (Maximum \$100 only)								

I, _____ agree and acknowledge that while traveling on the journey described above, I am liable for damage/s caused to the driver's vehicle by accident, and I have agreed to pay the above-mentioned expenses as compensation. The driver partner has informed me of the charges being deducted from my nominated card account; I have not and I will not raise any objections.

(Rider Signature)

Date: _____