



Circuit of The Americas, LLC (“COTA”) Truck/Trailer Storage Policy

- **Owner or operator must leave keys with the COTA office or COTA Security (512) 655-6220.**
- Placement of the vehicle is solely at the discretion of COTA.
- COTA can relocate the vehicle at COTA’s discretion.
- All storage on COTA property is made at the risk of the property owner. COTA is not responsible for theft or damage. Property owner and operator shall comply with work safety rules, regulations and instructions regarding the storage of property. Truck owner and operator agrees to indemnify, defend and hold COTA harmless from an against any claim made against COTA and/or COTA’s representatives for any loss or damage including property damage as result of truck owner and operator use of the COTA property.
- Hazardous material control: spills of damage causing fluids such as oils, hydraulic and brake fluids, gasoline, anti-freeze, battery acid, etc., can cause significant damage to paved and grass surfaces and the environment as well as creating dangerous situations for track users and other participants. All spills must be treated immediately on occurrence. COTA management must immediately be advised of all spills.
- Vehicle will be held in _____ until _____.
- Owner or operator will pay \$250.00 per week at the time of arrival of truck/trailer. Arrangements may be made with Alicia Prilipp.
 - Office: (512) 655-6571
 - Email: alicia.prilipp@thecircuit.com

The company representative designated below future states that he/she understands the contents of this document and signs this policy at his/her own free act.

Signed this _____ day of _____, 20____.

Print Name	Date
Signature	Contact Number
Team Name and Description of Vehicle	

4% service charge will be included if paying with a credit card. We accept cash and checks as well

CREDIT CARD PAYMENT AUTHORIZATION

1. Card Type: VISA MasterCard

2. Card Number: _____

3. Name on Card: _____

4. Expiration Date (MM/YYYY): _____/_____ CVV: _____

5. Billing Address: _____

City: _____ State: _____ Zip: _____

6. Email Address: _____

7. Phone Number: _____

8. **Signature and Authorization to Charge:** By signing below, I, the Licensee (or its duly authorized representative, by which signature the representative also certifies his/her authority to bind the Licensee), authorize CIRCUIT OF THE AMERICAS LLC (or its designee) to charge the above-identified credit card for:

The amount of \$_____ on or immediately following the date indicated next to my signature below

A 4% administrative fee will be added to the total for processing credit card transactions

CIRCUIT OF THE AMERICAS LLC (or its designee) is further authorized to retain this information on file for payment of future costs and fees. Licensee hereby agree to provide updated credit card account information to CIRCUIT OF THE AMERICAS LLC (or its designee) should Licensee's credit card account cease to be valid after the date below.

Signature

Date

Printed Name (if different from Name on Card)

Title