

FISHERGATE LEASING



TO:.....

PROPOSAL

FROM:.....

FORM

COMPANY/FIRM/SELF-EMPLOYED DETAILS. BUSINESS 'NAME':..... ADDRESS:..... POST CODE:.....	CONTACT NAME:.. TEL NO: LEASHOLD <input type="checkbox"/> <input type="checkbox"/> SOLE TRADER FREEHOLD <input type="checkbox"/> <input type="checkbox"/> PARTNERSHIP RENTED <input type="checkbox"/> <input type="checkbox"/> LTD CO
NATURE OF BUSINESS:..... COMPANY REGISTRATION NO:..... IF LTD COMPANY,ISSUED CAPITAL.....	HOW LONG IN BUSINESS:.....YEARS ARE DIRECTORS GUARANTEES AVAILABLE YES <input type="checkbox"/> NO <input type="checkbox"/>

FULL DETAILS OF PRINCIPAL DIRECTORS,PARTNERS,SOLE TRADER

NAME:..... ADDRESS:..... POST CODE:..... D.O.B..... HOW LONG AT THIS ADDRESS	NAME:..... ADDRESS: POST CODE:..... D.O.B..... HOW LONG AT THIS ADDRESS
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1F LESS THAN 3 YEARS PLEASE GIVE PREVIOUS ADDRESS

ADDRESS:..... POST CODE:.....	ADDRESS:..... POST CODE:.....
BANK NAME:..... ACCOUNT NAME:.....	<p style="text-align: center;">BANK DETAILS</p> ACCOUNT NO..... SORT CODE.....

OFFICE USE ONLY

VEHICLE DETAILS

OFFICE USE ONLY

QTY	VEHICLE DESCRIPTION	MILEAGE	PAYMENT PROFILE	RENTAL

APPLICANT DECLARATION

By signing this application, I agree that you may make credit inquiries and disclose information about this application as you think fit for the purpose of such inquiries.

Signature of applicant(s) Date _____