



Phone: 0870 224 4664
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CLIENT DETAILS			
TRADING NAME		CORE ACTIVITY	
REGD NAME		REGISTERED No	
TRADING STYLE	LTD PARTNERSHIP SOLE TRADER	VAT NUMBER	
REG'D ADDRESS		PHONE NUMBER	
		FAX NUMBER	
		MAIN CONTACT	
		JOB TITLE	
CITY/TOWN		EMAIL ADDRESS	
COUNTY	YEAR EST'D	FIN.YEAR END	
POSTCODE	No of CARS	No of LCVs	

PRINCIPLE DIRECTORS/PARTNERS DETAILS	1	2
FULL NAME		
DATE OF BIRTH		
MARITAL STATUS		
HOME ADDRESS		
CITY / TOWN		
COUNTY		
POSTCODE		
TIME AT ADDRESS		
PREVIOUS ADDRESS (if less than 3 years)		
POST CODE		
OWNED / RENTED / LIVE WITH PARENTS		

BANKING DETAILS	
BANK NAME	ADDRESS
SORT CODE	
ACC. NAME	CITY / TOWN
ACC. NUMBER	COUNTY
ACC OPENED	POSTCODE

COMMENTS

NAME OF PERSON COMPLETING FORM

SIGNATURE

Data Protection Act – Disclosure: We have told the prospective customer/guarantor that a credit reference agency search will be made against customer /guarantor and recorded by the agency and that the customer/guarantor may receive mailings from you about your services. (We have also told the customer/guarantor how we intend to use the information provided.)