

Customer Proposal Form

Sales Person:	Business Type:	
Date:	Customer Fleet Size:	
Customer Name:	Wholly Owned: Y/N	
Address:	Subsidiary: Y/N	
	Parent Company:	
	Accounts Year End:	
Postcode:	Cheque/Direct Debit:	
Telephone No:	Payment Profile:	
Fax No:	Bank Name:	
Contact Name:	Bank Address:	
Position:		
Company Reg. No:	Account No:	
Date Established:	Sort Code:	
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FOR DRIVE BUY CAR CONSULTANTS USE ONLY			
Proposed Business:	CH: CH: Other:		
Initial Orders:	Average Monthly Rental: £		
Potential 12 Months:	Accounts Attached: Y/N		