


<p align="center">AMT Leasing Ltd Unit 4, Matrix Court, Middleton Grove, Leeds LS11 5WB</p> <p align="center">Tel: 0844 8262300 Fax: 0844 8262301 Email : sales@amtleasing.co.uk</p>				 contract hire and leasing	
New Vehicle Proposal Form			Business User		
1. CUSTOMER DETAILS					
Company Type: Limited / Partnership / Sole Trader – delete as applicable					
Full Company Name					
Co Registration No (leave blank if not app).			Contact Name and No		
Business Address Post Code					
Tel.No.		Fax. No.	VAT No	Date Established	No of Partners
Type of Premises : Owned / Leased / Rented - delete as applicable					
Type of Business :					
BUSINESS BANK DETAILS					
Name and Address of Bank				Sort Code	
Account Number				Time with Bank	Yrs
The Following Section Needs to be completed in the following situations: 1. For a Limited Company – Provide at least one directors details 2. For all Partnerships – Provide all partners details 3. For all Sole Traders – Provide sole traders details 3 Years address history is required					
GUARANTOR/PARTNER/DIRECTOR/PERSONAL DETAILS					
Title		Initial	First Name		Surname
Address					
Postcode		Tel.No		Time at address	yrs mths
If less than 3 yrs, please give previous address					
Postcode			Time at address	yrs mths	
Previous/Maiden Name			Date of Birth		
Marital Status		Owner/Tenant		No of dependants	

GUARANTOR/PARTNERS/DIRECTOR/PERSONAL DETAILS

Title	Initial	First Name	Surname
Address			
Post code	Tel No	Time at address	yrs mths
If less than 3 yrs, please give previous address			
Postcode	Time at address		yrs mths
Previous/Maiden Name	Date of Birth		
Marital Status	Owner/Tenant	No of dependants	

GUARANTOR/PARTNERS/DIRECTOR/PERSONAL DETAILS

Title	Initial	First Name	Surname
Address			
Post code	Tel No	Time at address	yrs mths
If less than 3 yrs, please give previous address			
Postcode	Time at address		yrs mths
Previous/Maiden Name	Date of Birth		
Marital Status	Owner/Tenant	No of dependants	

Data Protection Notice: By signing this document you confirm that the information you have provided is true and complete. You also confirm that you give express permission to us to pass this information on to third party finance houses for the specific purpose of ascertaining credit worthiness. In addition to enquiries made on the company searches may be undertaken with a credit reference agency on the directors of the company and a record of those searches may be placed on the directors credit file. We will collate and hold any data that you provide on computers and/or in paper files. This data will be stored securely and disseminated on a need to know basis only.

Authorised Signatory.....**Date:**.....

For and on behalf of.....

PLEASE COMPLETE IN BLOCK CAPITALS AND FAX IT BACK TO 0844 8262301