

New Business Proposal
FAXBACK to Universal Leasing on 01920 823 544

Name of Supplier		
Customer Name (full trading name)		
Full Trading Address		
Term of unexpired lease		
How Long at this Address		
Telephone Number		
Contact Name		
Type of Business		
Company Registration Number		
Date Established		
Principal Director/ Partners (Please use separate sheet if necessary)	1	Date of Birth:
	2	Date of Birth:
Private Addresses (Previous addresses if at current address less than 3 years)	1	
	2	Value of Property/Mortgage Outstanding
		Value of Property/Mortgage Outstanding
Home Owners	YES/NO	
Name & Address of Bankers		
Full Description of Equipment	NEW/USED	
Location of Equipment		
Capital Value	£	plus VAT=
Payment Profile		