

SCHOOLS PROPOSAL FORM

Please complete all fields as missing information could delay the underwriting decision



SCHOOLMINIBUSLEASING

School Minibus Leasing Specialists 01942 608606

School Details

School Name _____

Address _____

City / Town _____

County _____

Postcode _____

Authority _____

Address _____

City / Town _____

County _____

Postcode _____

Contact Details

Primary Contact _____

Job Title _____

Contact Number(s) _____

Email Address _____

Switchboard _____

Fax Number _____

Website _____

Authorised Person(s) Details

Title Mr/Miss/Mrs/Ms _____

Full Name _____

Job Title _____

Date of Birth _____

Title Mr/Miss/Mrs/Ms _____

Full Name _____

Job Title _____

Date of Birth _____

School / Governors Purchase Order _____

Available **Y/N** _____

Bank Details

Bank Name _____

Bank Address _____

Sort Code _____

Account Number _____

Account Name _____

Post Code _____

Account Opened _____

Data Protection Act 1998 registration number : Z617897
Kings Business Centre, Warrington Road, Leigh, WN7 3XG

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