

## RENTAL CREDIT APPLICATION

NAME & REGISTRATION NUMBER OF SUPPLIER:					
CONTACT PERSON:		CONTACT NUMBER:			
DESCRIPTION OF EQUIPMENT:			_		
SETTLEMENT INVOLVED: (Please provide details if applicable)					
PERIOD OF CONTRACT (36, 48 or 60 Months)	FACTOR	ANNUAL ESCALATION%	RENTAL AMOUNT EX	KCL. VAT	
PLEASE NOTE A ONCE-OFF INITIATION FEI	OF R1 150 INC	CL. VAT IS PAYABLE UPON	COMMENCEMENT OF	THE RENTAL AGREEMENT.	
NAME OF BUSINESS (Full Legal Entity & Trade Style):					
NATURE OF BUSINESS					
REGISTRATION NUMBER:		DATE EST.			
VAT NUMBER:			EMAIL:		
CONTACT PERSON:			TEL NO:		
CELL:			FAX NO:		
PHYSICAL/INSTALLATION ADDRESS:	-				
POSTAL ADDRESS:	-				
NAME & POSTAL ADDRESS OF LANDLORD:					
CONTACT PERSON & NUMBER OF LANDLORD:					
INSURANCE BROKER: CONTACT PERSON:		AUDITOR:  CONTACT PERSON:			
CONTACT PERSON.  CONTACT NUMBER:		CONTACT NUMBER:			
EMAIL ADDRESS:	-				
POLICY NUMBER:	'				
DIRECTORS/MEMB	ERS/SHAREHO	LDERS/OWNERS/CONTRO	LLING COMPANY DET	AILS:	
FULL NAMES	%SHARES	ID NUMBER	RESI	DENTIAL ADDRESS	
BANKERS	BRANCH AN	D BRANCH CODE	ACCOUNT #	DATE A/C OPENED	
ANNUAL TURNOVER	N	ET ASSET VALUE		INITIAL:	
TRADE REFERENCE & CREDIT BUREAU CONSENT  I/We hereby consent to you or your cessionary/ies making enquiries to my/our credit records and trade refer	ences with any credit reference ag	ency or any third party to confirm the details provided and	confirm that this consent shall apply in every resp	nect to every director, shareholder, member and/or associate of the	
applicant. As signatory to this application I/we hereby indemnify you or your cessionary/les against any claim MARKETING CONSENT					
I/We consent to The Rental Company Trust providing personal details to its Cessionary/ies subsidiaries and as purposes. FRAUD PREVENTION	sociated entities and other depart	ments for purposes of marketing and referring potential bu	siness opportunities from and by its cessionary/ie	is subsidiaries and associated enuties as well as for credit assessment	
Act No 38 of 2001. We consent to you carrying out identity and fraud prevention checks and sharing informa CERTIFICATE					
I/we certify that to the best of my/our knowledge and belief the information I/we have given you is correct as winding up orders or pending applications for liquidation or threatened against the Applicant or its directors/		ers or circumstances which I/we have not disclosed to you in	n writing which might influence your decision. I/V	Ve certify that there are no writs, summonses, judgements, petitions,	
I/We Warrant that the Annual Turnover and/or Net Asset Value is true and correct and acknowledge that	The Rental Company Trust has re	elied on such warranty in determining the legal framewo	k of the facility		
			_		
Duly Athorised hereto:		Date:			
Name:		_			
Capacity:		_			
For and on hehalf of:					