



Manager / Salesman Lease Request Form

Date of Request: _____

Manager / Salesman Name & Phone Number: _____

Customer Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Customer Contact Name & Title: _____

Mobile Phone: _____ Office Phone: _____ Other Phone: _____

Contact Email Address: _____

EQUIPMENT INFORMATION

Chassis Year: _____ Unit Type: _____

Chassis Make: _____ Unit Year: _____

Chassis Model: _____ Unit Make: _____

New/Used/Refurbished: _____ Unit Model: _____

New/Used/Refurbished: _____

Mileage: _____

Engine Hours: _____ VTR Unit # (If Applicable): _____

Pump Hours: _____

PRICING & AVAILABILITY

Estimated Date of Delivery or Availability: _____

Selling Price: _____

FOR VTR UNITS ONLY:

Monthly Rent: _____ Rental Start Date: _____ Total Rent Due: _____

Estimated Rental Credit: _____ As of: _____

ADDITIONAL NOTES & COMMENTS: