

Motor Vehicle Details Form

Loan Reference Number

Invoice To (Insert Customer Name)**Delivery To (Insert Customer Address)**

Year

Make

Series

Model

Badge/Pak

Type of Vehicle

■ Please tick all appropriate boxes (more than one box maybe selected) Sedan Ute Turbo 2 Wagon Table Top Auto 3 Coupe 4WD Manual 4 H/Back Pannel Van Truck 5 Petrol Diesel L.P.G If more than 5 please insert number of doors

Doors

Vehicle Information

Rego expiry

 / /

KM's

Engine capacity

 4cyl 6cyl 8cyl

Rego number

Engine number

VIN/Chassis number

Extras

■ Please tick (more than one box maybe selected) Metallic paint Mag wheels ABS brakes Sun roof Air conditioning Power steering Power windows Central locking Climate control Alarm system Tinted windows Sports pack Leather trim Roof racks Dual air bags Limited slip diff**Fax to: 1300 762 338**

Please Affix
Company Stamp
Here

Sales person

Company ABN number

Contact number

 ()

Company name

Date

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