

Lease order

Customer information	
Company name:.....	Contact:.....
Street, no.:.....	Email:.....
Zip, place:.....	Tel:.....
	Fax:.....

Information about the object, delivery and payment		
Description of the leasing object (or enclose a copy of the reseller quotation):		
Planned delivery on:.....		
Purchase price net:	Lease duratio:	Payment:
CHF.....	24 month <input type="checkbox"/>	Monthly <input type="checkbox"/>
Lease rate net:	36 month <input type="checkbox"/>	Quarterly <input type="checkbox"/>
CHF.....	Other:.....	

If necessary the lease check may obtain the need for further financial documents.
 Please send the lease order to:
 Fax 0041 443 553 366 or email leasing@garrett.ch

In case of questions or if our help is required we are happy to stay at your disposal under
 Tel.: 0041 445 866 866


 Place, date Signature and company stamp