













**PLEASE INDICATE WHAT TYPE OF TRAILER IS REQUIRED  
TO HIRE:**

- |   |                          |
|---|--------------------------|
|  Tandem axle flat deck                                   | <input type="checkbox"/> |
|  Tandem axle pantech                                     | <input type="checkbox"/> |
|  Tandem axle back tipper                                 | <input type="checkbox"/> |
|  Tri axle flat deck                                      | <input type="checkbox"/> |
|  Tri axle pantech  | <input type="checkbox"/> |
|  Tri axle stepdeck                                       | <input type="checkbox"/> |
|  Tri axle fitted with maize sides                        | <input type="checkbox"/> |
|  Interlink tandem tandem grain carrier                   | <input type="checkbox"/> |
|  Interlink tandem tandem side tipper                   | <input type="checkbox"/> |
|  Tandem tandem curtain side well deck link (127 cubes) | <input type="checkbox"/> |
|  Superlink tandem tandem flat deck trailer - 18m       | <input type="checkbox"/> |
|  Superlink tandem tandem tautliner/curtain side - 18m  | <input type="checkbox"/> |

**RENTAL PERIOD**

- |   |                          |
|---|--------------------------|
|  Daily   | <input type="checkbox"/> |
|  Monthly | <input type="checkbox"/> |



# Edan Vehicle and Asset Hire (Pty) Ltd

Physical Address: Portion 222, Cnr Beyers Naude & Ibis Lane, Honeydew, 2040

Postal Address: P.O. Box 1978, Honeydew, 2040

Tel No: (011)-795-1944/5/6/7/8 • Fax No: (011)-794-6079 • Cell No: 072-087-0659

E-mail: cheryl@edan.co.za • VAT Number: 4660208804 • Reg No: 2003/016765/07

## NOTICE TO ALL APPLICANTS

### WHEN APPLYING TO RENT A TRAILER

		<u>Personal</u>	<u>Business</u>
<b>Application Form:</b>	Complete in full, and sign the attached application form.	YES	YES
<b>I.D.:</b>	We require a copy of your ID	YES	YES
<b>Bank Statements:</b>	3 Months Bank Statements	YES	YES
<b>VAT Number:</b>	Copy of V.A.T. Registration Certificate (if V.A.T. Reg.)	YES	YES
<b>Proof of Residence of applicant:</b>	Copy of water & lights account, or any post that is delivered to your physical address.	YES	YES
<b>PDP:</b>	A copy of your drivers valid Public drivers permit	YES	YES
*	Certificate of Incorporation (CM1), Certificate to Commence Business (CM46), Founding Statement (CK1) or Amended Founding Statement (CK2).	YES	YES
*	Resolution of Directors\Members authorising a Representative to sign all documentation pertaining to the Lease Agreement.	YES	YES

### FOR YOUR INFORMATION:

- 1) A deposit is required upon approval together with the first month's rental and insurance. Please note that the monthly rental is payable in advance.
- 2) When we receive all the requested information from you we will do an I.T.C. check.
- 3) The contact terms will be enforced unless discussed with management and any amendments are reduced to writing and duly signed.
- 4) The trailer will be insured through the appointed broker of Edan Vehicle and Asset Hire (Pty) Ltd. Insurance does not include goods in transit, that will be the responsibility of the Hirer.
- 5) Please note that no cross border is allowed.

Please note that if the trailer is returned before 12:00pm will be charged at half a days rental, any time after will be considered a full days rental.

Please sign below to indicate that you have read and understand the above terms and conditions

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



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## COMPANY APPLICATION FORM TO RENT A TRAILER

Registered Name: \_\_\_\_\_

Trade Name: \_\_\_\_\_

VAT Number: \_\_\_\_\_ Registration Number: \_\_\_\_\_

<b>Sole Prop</b>	<b>Partnership</b>	<b>(Pty) Ltd</b>	<b>Limited Company</b>	<b>Close Corporation</b>	<b>Trust</b>
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Telephone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell No: \_\_\_\_\_

Postal Address: \_\_\_\_\_ Code: \_\_\_\_\_

Full Physical Address: \_\_\_\_\_ Code: \_\_\_\_\_

Above premises:  **Owned**  **Rented** Details of Landlord (if rented): \_\_\_\_\_

Details of Sole Owner / Partners / Members / Directors:

Full Name and Surname	I.D. Number	Home Address	% Share Holding	Marital Status (Unmarried/Out of Community/In community of property /according to laws)

Bank: \_\_\_\_\_ Account No: \_\_\_\_\_ Branch: \_\_\_\_\_

### Tell us about your contact:

Do you have a contract presently:  **Yes**  **No**

With Whom: \_\_\_\_\_ Contact Person: \_\_\_\_\_ Telephone No: \_\_\_\_\_

What will you be transporting with our trailer: \_\_\_\_\_

Where will you be operating with our trailer: \_\_\_\_\_

Make & Model of your truck: \_\_\_\_\_ Truck Registration No: \_\_\_\_\_

Is the truck a rental / owned: \_\_\_\_\_ If rented - Owners details: \_\_\_\_\_

Do you have insurance on your truck: \_\_\_\_\_ With Whom and contact number: \_\_\_\_\_

**Name, Address and contact number of Landlord of premises where the trailer and goods will be kept:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### CONFIRMATION

I/we hereby warrant that I/we have answered all your questions and request for information fully and truthfully as part of his assessment process.

#### Authorised Signatories of Business:

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Signatory Capacity: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Signatory Capacity: \_\_\_\_\_

Date: \_\_\_\_\_



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### INDIVIDUAL APPLICATION FORM TO RENT A TRAILER

Full Names: \_\_\_\_\_ Surname: \_\_\_\_\_

Title (Mr/Mrs/Miss/Dr.) \_\_\_\_\_ Gender: \_\_\_\_\_

I.D. Number / Passport Number: \_\_\_\_\_ if passport we require a copy of temporary residence permit

Full Physical Address: \_\_\_\_\_ Code: \_\_\_\_\_

Above premises: 

Owned	Rented
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 Details of Landlord (if rented): \_\_\_\_\_ Code: \_\_\_\_\_

Postal Address: \_\_\_\_\_ Code: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell No: \_\_\_\_\_

Type of Employment: 

Self Employment	Unemployed	Casual Worker	Salary Earner	Pensioner
-----------------	------------	---------------	---------------	-----------

Present Employer: \_\_\_\_\_

Occupation \_\_\_\_\_

Employed Since \_\_\_\_\_

Address of Present Employer: \_\_\_\_\_

Employer Contact Number: \_\_\_\_\_

Bank: \_\_\_\_\_ Account No: \_\_\_\_\_ Branch: \_\_\_\_\_

Marital Status: 

Unmarried	Out of Community	In Community of Prop	According to Laws
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#### Spouse Details: (To be completed if married in community of property / according to law)

Full Names: \_\_\_\_\_ Surname: \_\_\_\_\_

Title (Mr/Mrs/Miss/Dr.) \_\_\_\_\_ Gender: \_\_\_\_\_

I.D. Number / Passport Number: \_\_\_\_\_ if passport we require a copy of temporary residence permit

Full Physical Address: \_\_\_\_\_ Code: \_\_\_\_\_

Above premises: 

Owned	Rented
-------	--------

 Details of Landlord (if rented): \_\_\_\_\_ Code: \_\_\_\_\_

Postal Address: \_\_\_\_\_ Code: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell No: \_\_\_\_\_

Type of Employment: 

Self Employment	Unemployed	Casual Worker	Salary Earner	Pensioner
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Present Employer: \_\_\_\_\_

Occupation \_\_\_\_\_

Employed Since \_\_\_\_\_

Address of Present Employer: \_\_\_\_\_

Employer Contact Number: \_\_\_\_\_

#### Tell us about your contact:

Do you have a contract presently: 

Yes	No
-----	----

With Whom: \_\_\_\_\_ Contact Person: \_\_\_\_\_ Telephone No: \_\_\_\_\_

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Where will you be operating with our trailer: \_\_\_\_\_

Make & Model of your truck: \_\_\_\_\_ Truck Registration No: \_\_\_\_\_  
Is the truck a rental / owned: \_\_\_\_\_ If rented - Owners details: \_\_\_\_\_  
Do you have insurance on your truck: \_\_\_\_\_ With Whom and contact number: \_\_\_\_\_  
**Name, Address and contact number of Landlord of premises where the trailer and goods will be kept:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CONFIRMATION**

I/we hereby warrant that I/we answered all your questions and request for information fully and truthfully as part of his assessment process.

**Authorised Signatures**

Signed at \_\_\_\_\_ on \_\_\_\_\_  
(place) (date)

By applicant \_\_\_\_\_  
Signature

Spouse Signauter (if married in community of property / according to laws) \_\_\_\_\_  
Signature