

<input type="checkbox"/> Lessee		<input type="checkbox"/> Co-debtor	
Type of asset:		<input type="checkbox"/> Model: <input type="checkbox"/> new <input type="checkbox"/> used	
		<input type="checkbox"/> Mileage in km:	<input type="checkbox"/> Year of production:
<input type="checkbox"/> Supplier:		<input type="checkbox"/> Financial lease with option to buy (VAT paid over each lease instalment)	<input type="checkbox"/> Financial lease without option to buy (VAT paid in advance)
Contact person:			
Surname, Name, Father's name:			
Date of birth:		EGN/Personal №:	
ID Card N:/ Passport N:		Date of issue:	Place of issue:
A permanent residence:			
Town/ Village:		Aria:	Municipality:
Post code:		Street, Boulevard, Housing estate:	No: / Bl: App:
The apartment where I live is:			
<input type="checkbox"/> private	<input type="checkbox"/> Own with mortgage	<input type="checkbox"/> Lives with parents	<input type="checkbox"/> Rent
			<input type="checkbox"/> Co-owned (unmarried)
			<input type="checkbox"/> Coexistence (excluding rent)
			<input type="checkbox"/> Other
How long have you live at the address?		Months	Years
Contact number:		Business phone:	Mobile phone:
Home phone:			
Education/profession:			
Education:		<input type="checkbox"/> secondary	<input type="checkbox"/> secondary specialized
		<input type="checkbox"/> university	<input type="checkbox"/> master
Profession:		Sector:	<input type="checkbox"/> Public service <input type="checkbox"/> Private <input type="checkbox"/> Other
Current employer (name of institution/company):			
Education/Position:			
UIC:		How long have you worked for this employer:	Months Years
Address of employment:			
Previous employer (name of institution/company):			
How long have you worked at previous employer:		Months	Years
Marital status:			
<input type="checkbox"/> Married	<input type="checkbox"/> Single	<input type="checkbox"/> separated	<input type="checkbox"/> widower/widow
			<input type="checkbox"/> cohabitation
Surname, Name, Father's name (Husband / Spouse):			
EGN/Personal №:		Name of institution/company (Husband / Spouse):	
Education/Position(Husband / Spouse):			
UIC:		Work address of Husband / Spouse:	
Working adults:		At-rest position	Children below 7 years age.: Children between 7-18:
Family income:			
Method of payment:		<input type="checkbox"/> Bank account	<input type="checkbox"/> hard net cash; <input type="checkbox"/> Other
Frequency receive o.'s salary:		<input type="checkbox"/> Monthly	<input type="checkbox"/> Of two weeks <input type="checkbox"/> Weekly <input type="checkbox"/> Per hour <input type="checkbox"/> Other
I. Net monthly salary in BGN:	1. A labour agreement	2. Free labour, exercise of medical practice	3. Other income
			4. Including management and control
			5. Rents
			6. Others (sale of shares and other participations)
Declarer			
Spouse			
II. Monthly income of other family members (scholarships, alimony, pensions, etc.)			
Total income of the family:			

Property: Lessee /Co-debtor							
Real estate property: <input type="checkbox"/> Yes <input type="checkbox"/> No							
Type of property:	Number	Location	Indivaidabul parts	Approximate value	living-/ floor-space	Praived ownerships	Encumbrance/ third parties rights
Residential							
Commercial /industrial							
Other							
Movable property of a value of over BGN 5000 : <input type="checkbox"/> Yes <input type="checkbox"/> No							
Type of movable property	Model:	Year of production:	Registration. №	Approximate value	Personal property	Encumbrance/ third parties rights	
Cars							
Other							
Deposit account and payment card accounts at banks or others. financial institutions:							
Bank/ financial institution	Type and № of account	Approximate value		Opening an account - before or after marriage		Distrain, pledge (real, specific)	
Securities, incl. (type and value) and shares in companies:							
Used bank credits:							
	Creditor 1:	Creditor 2:	Creditor 3:	Creditor 4:			
Name of creditor:							
Type of Loan:							
Amount of loan:							
Maturity date:							
Monthly installment:							
Part of the loan:	Borrower / joint debtor / co-debtor guarantee	Borrower / joint debtor / co-debtor guarantee	Borrower / joint debtor / co-debtor guarantee	Borrower / joint debtor / co-debtor guarantee			
Other Monthly liability:							
Rents: / amount of monthly rent if the person is living rent /							
We'd like to have the following lease conditions:							
Purchase price in EUR w/o VAT	Downpayment %	Finance amount in EUR w/o VAT	Option to by %	Duration	Number of installments	Grace period	
Contact Person (other than a client living at a different address):							
Surname, Name, Father's name,:							
Address:							
Contact number:		Fax:		E-mail:			
We declare that:							
<p>We're aware that the provided information is crucial for the approval of our application for financial leasing and the lessor has the right to reject or change the parameters of the deal. We're also aware that in case of not approving the application the lessor is not obliged to inform us about the reason on a written form.</p> <p>The company represented by me/us is not in liquidation procedure, not under bankruptcy protection and not in insolvency.</p> <p>We have no other related persons except the ones, mentioned in point 5, we have no other credits or leasing contracts except the ones, mention in point 6, we the owners/shareholders have no criminal records by the date of the application and we have no financial obligations to the State or current tax-state audits.</p> <p>With this application we authorize the lessor through a person appointed by him to complete the necessary facts that he consider imported for the analysis of my/our creditability and the confirmation of the declared data.</p> <p>We know that in case of misrepresentation we bear responsibility according article 254 PC (Penal Code).</p> <p>As clients of Piraeus Leasing we're obliged in case of any changes concerning the declared information to inform the lossor within one week in a written form.</p>							
Declarer : (Lease Applicant/Co-debtor)					Place:		
/ Signature/					Date: ____/____/____		
.....							
/Name/							
Declarer : Husband / Spouse					Place:		
/ Signature /					Date: ____/____/____		
.....							
/Name/							