

MEMBERSHIP PROFILE AND APPLICATION FOR LEASING COMPETITIVE EDGE

RETURN FORM TO: Email: LCE@cathedralconsulting.com | Fax: 414-273-1983

The following information will be used to assist Cathedral Consulting, LLC in evaluating the demographic and characteristic information about individuals seeking membership in the Leasing Competitive Edge Study Group. The information submitted below, will be maintained in a confidential manner and will be disclosed only to those current group members who are entitled to vote on the acceptance or rejection of the prospective member.

Please provide the following information as completely as possible. If more space is required, please attach additional pages.

COMPANY INFORMATION:

Company Name:	Hours of Operation: from	to	No. days:
Company Address:	Number of years company in leasing business:		
City, State, Zip:	Affiliated New Car franchises:		
Main Telephone:	Fax:	Other leasing locations:	
Company's Website address:		Candidate's e-mail address:	

Please include any other pertinent information about the company's location and affiliations:

TYPE OF COMPANY: *AS OF ____/____/____

1. Size of Portfolio(s), and Current Monthly Volume:	Describe other type of lease company related auto/equipment leasing activity that exists:																									
<table border="0"> <tr> <td></td> <td># of Active Units</td> <td>% of Bus.</td> </tr> <tr> <td>In-House Vehicle Leases:</td> <td></td> <td></td> </tr> <tr> <td>Equipment Leases:</td> <td></td> <td></td> </tr> <tr> <td>Daily Rental:</td> <td></td> <td></td> </tr> <tr> <td>Brokered Leases:</td> <td></td> <td></td> </tr> </table>		# of Active Units	% of Bus.	In-House Vehicle Leases:			Equipment Leases:			Daily Rental:			Brokered Leases:			<table border="0"> <tr> <td></td> <td>Monthly Volume / Annual Dollar Sales / or "Other"</td> </tr> <tr> <td>H/D Truck Leases:</td> <td></td> </tr> <tr> <td>Used Car Sales:</td> <td></td> </tr> <tr> <td>New Car Sales:</td> <td></td> </tr> <tr> <td>Fleet Sales:</td> <td></td> </tr> </table>		Monthly Volume / Annual Dollar Sales / or "Other"	H/D Truck Leases:		Used Car Sales:		New Car Sales:		Fleet Sales:	
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2. What type of marketing / selling focus does the company generally pursue? (e.g. business, consumer, open-end, closed-end, used car, high-line leasing, etc.):

3. Please define your: a) Primary Marketing Area(s):

b) Typical Prospect Profile:

NAME OF PRINCIPALS AND OTHER EMPLOYEE INFORMATION:

Owner / Officer / Manager (1):	Title:	Years with company:
Owner / Officer / Manager (2):	Title:	Years with company:
Owner / Officer / Manager (3):	Title:	Years with company:
Owner / Officer / Manager (4):	Title:	Years with company:

4. Please indicate the number of any other employees of the lease company:

Sales:	Service:	Administrative:	Clerical:	Other or Part-time:
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5. Total number of full-time (lease company) personnel:	Total number of part-time (lease company) persons:
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SALES TRENDS AND OTHER MARKETING INFORMATION:

6. Please check one of the following per each criterion, and give a brief explanation as to why:

Our annual In-House lease delivery volume, is: Increasing [] Decreasing [] Holding level []
Our annual profitability (before taxes), is: Increasing [] Decreasing [] Holding level []
Why? :

7. List your estimated renewal rate on expired leases during the past 2 years, as a percentage of total terminations:

In-House % Brokered %

8. Please describe any special services used to sell new customers and/or to retain existing lessees (e.g. maintenance programs, insurance or insurance administration services, loaner cars, direct service capability or service administration, etc.):

OPERATING SYSTEMS:

9. Please describe the type of computer systems, hardware, and software applications that are currently used in the daily operation of the leasing company:

Hardware Type:	Operating System (Windows XX, etc.):
Software by Application:	Network / Type:
Accounting:	Contact Mgmt:
Management Data:	New Car Pricing:
Insurance Tracking:	Word Processing:
Communications:	Other Software:
Network?	

APPLICANT INFORMATION:

Applicant's Name:

10. How long have you been in the long-term vehicle leasing business: years. Are you a CVLE?

11. Briefly list other positions and industries which contributed in significant part to your business career / expertise:

12. What primary objectives and goals do you hope or expect to accomplish by joining a Leasing Study Group?

13. How did you learn about the Leasing Competitive Edge Study Group program?

14. Have you ever been a member of a study group? If yes, to which group?

15. Please list any lease, or vehicle-related trade associations of which you are, or have been, a member:

Attest: The undersigned hereby certifies that the above information is both true and complete, and that it is given with the express understanding that it will be used to assist Cathedral Consulting, LLC, and the members of any prospective LCE Lessor Study Group, in determining the compatibility and qualification of the applicant: and further, that membership is solely determined by the unanimous acceptance of the voting members of that group, and not by Cathedral Consulting, or any of its staff.

(Print / Type Name of the Leasing Company)
Application Date: _____

(Print / Type Name of the Individual Member/Applicant)
(Please check the box to affirm the Application)