

QFleet Vehicle Order- Replacement Form



Department / Agency _____

Client Code _____

Is this a replacement vehicle? Yes No

Current vehicle rego no. _____

Current Agreement _____

Vehicles Current odometer reading _____ km Date of Reading _____

New Lease Information

Required Lease Months _____ Predicted vehicle usage _____ km / annum

Your Reference _____

Vehicle Operating Location _____

Required Delivery Location _____

Will this vehicle be used on/near sand/salty water Yes No

Vehicle Requirement

Vehicle Make/Model Preference _____

Passenger

Segment

Body Type

Commercial

Segment

Body Type

Fuel Type

Transmission

Colour Preference _____ # Seats _____ Private Plates Yes No

Required Accessories (If you require excessive accessories please list on a separate page and attached to this form)

Requesting Officer

Name _____ Phone _____

Position _____

Signature _____ Date _____