

CATHEDRAL LCE LESSOR STUDY GROUPS
MEMBERSHIP PROFILE and APPLICATION

[Revised: 10/02]

Mail, or FAX-Back to:
414-273-1983

*The following information will be used to assist Cathedral Consulting Group in evaluating the demographic and characteristic information about individuals seeking membership in an **LCE** Lessor 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.*

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Please complete the following information as completely as possible: (If more space is required, attach additional pages.)

Company Information:

Name of company: _____ Hours of operation: from _____ to _____ No. days: 5 6 7
 Company address: _____ Number of years company in leasing business: _____
 City, State, Zip: _____ Affiliated N/C franchises: _____
 Main Telephone: _____ Fax: _____ Other leasing locations: _____

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

Type of Company:

- | <p>1. What percentage and volume of your leasing activity is:</p> <table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: left;"><u># of Active Units</u></th> <th style="text-align: left;"><u>Pct. of Bus.</u></th> </tr> </thead> <tbody> <tr> <td>Vehicle Leasing: _____ %</td> <td></td> </tr> <tr> <td>Equipment Leasing: _____ %</td> <td></td> </tr> <tr> <td>Daily Rental: _____ %</td> <td></td> </tr> <tr> <td>Brokered Leasing: _____ %</td> <td></td> </tr> </tbody> </table> | <u># of Active Units</u> | <u>Pct. of Bus.</u> | Vehicle Leasing: _____ % | | Equipment Leasing: _____ % | | Daily Rental: _____ % | | Brokered Leasing: _____ % | | <p>Describe other type of lease company related auto/equipment leasing activity that exists:</p> <table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: left;"><u>Monthly Volume / Annual Dollar Sales / or "Other"</u></th> </tr> </thead> <tbody> <tr> <td>H/D Truck Leasing: _____</td> </tr> <tr> <td>Used Cars Sales: _____</td> </tr> <tr> <td>New Car Sales: _____</td> </tr> <tr> <td>Fleet sales: _____</td> </tr> </tbody> </table> | <u>Monthly Volume / Annual Dollar Sales / or "Other"</u> | H/D Truck Leasing: _____ | Used Cars Sales: _____ | New Car Sales: _____ | Fleet sales: _____ |
|--|--------------------------|---------------------|--------------------------|--|----------------------------|--|-----------------------|--|---------------------------|--|--|--|--------------------------|------------------------|----------------------|--------------------|
| <u># of Active Units</u> | <u>Pct. of Bus.</u> | | | | | | | | | | | | | | | |
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| Fleet sales: _____ | | | | | | | | | | | | | | | | |
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 primary geographic marketing area(s), and "targeted" prospect type (i.e. typical customer profile):

Name of Principals and other employee information:

Owner / Officer / Manager (1): _____ Title: _____ Years with company: _____
 Owner / Officer / Manager (1): _____ Title: _____ Years with company: _____
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 Owner / Officer / Manager (1): _____ 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: _____
5. Total number of full-time (lease company) personnel: _____ Total number of part-time (lease company) persons: _____

Sales Trends and Other Marketing Information:

6. Please check one of the following per each criteria, 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: _____

Applicant Information:

10. How long have you been in the long-term vehicle leasing business: _____ years. Are you a CVLE? ___ YES ___ NO

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 Cathedral **LCE** Lessor Study Group program?

14. Have you ever been (or are you a current) member of a study group? _____ If "yes", to which group? _____

15. Please list any lease (or vehicle-related) local, state, or national 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 Group, 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 Group, or any of its staff.*

(Print / Type Name of Leasing Company)

(Print / Type Name of the Individual Member/Applicant)

Application Date _____

(Signature of the Individual Member/Applicant)