

# Application for Leasing



An Affiliate of Hoekstra Truck Equipment, Inc.

Please print this form and complete.

Fax to:

**(248) 244-9470**

260 36TH STREET, S.E.  
P.O. BOX 2246  
GRAND RAPIDS, MI 49501-2246  
(616) 241-6664 • FAX (616) 241-1111

BRANCH:  
555 OLIVER STREET  
TROY, MI 48084  
(248) 244-8942 • FAX (248) 244-9470

## Lessee Information:

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

*Please check one:*

Charter School

Corporation   
(Taxable)

Private School

Public School

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## Vehicle Needs:

Desired school bus model: *(Check all that apply)*

Type A – *Thomas Minotour* Capacity: \_\_\_\_\_ Qty: \_\_\_\_\_  Gasoline  Diesel

Type C - *Thomas FS-65 Conventional* Capacity: \_\_\_\_\_ Qty: \_\_\_\_\_

Type C - *Thomas Saf-T-Liner C2* Capacity: \_\_\_\_\_ Qty: \_\_\_\_\_

Type D – *Thomas Saf-T-Liner MVP-EF*  
*(Engine Forward)* Capacity: \_\_\_\_\_ Qty: \_\_\_\_\_

Type D – *Thomas Saf-T-Liner HDX*  
*(Engine Rear)* Capacity: \_\_\_\_\_ Qty: \_\_\_\_\_

Desire Equipment Options: \_\_\_\_\_

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

## Lease Information:

Term Desired: 2-Year  3-Year  4-Year  5-Year  Other: \_\_\_\_\_

Frequency of Payment: Annual  Monthly  Monthly with skipping # months   
Which months: \_\_\_\_\_

Maintenance Source: \_\_\_\_\_

Full Maintenance Lease Option: Yes  No

Number of Buses Currently Operated: \_\_\_\_\_