THAR MOTORS
CAR SALES • CAR RENTALS • FINANCE

Payment Arrangement Request Form

This form is for customers requesting a payment arrangement to gradually clear outstanding balances owing to Thar Motors. Completion of this form does not automatically approve a payment arrangement. All arrangements are subject to assessment and written approval by Thar Motors.

Full Name:	
Date of Birth:	
Driver Licence Number:	
Contact Number:	
Email Address:	
Residential Address:	
Vehicle Registration:	
Amount Owing:	
Proposed Weekly/Fortnightly Payment:	
Preferred Payment Start Date: (should be no later than 14 days in future)	

Reason for Financial Hardship (Optional)

Declaration

I declare that the information provided in this form is true and correct to the best of my knowledge.

Customer Signature:		Date:	

Thar Motors
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