Diana Group LLC

Client Intake Form

Date: ____/____/_____

Name: _____

Address: _____

_____

_____

Phone: _____ Email: _____

Preferred contact method: _____

About You:

Are you over 21 years of age? YES__ / NO__ Date of Birth: _____

Occupation: _____

Gross Monthly Income_____

Are you Insured? _____ Name of Insurance Agency: _____

Policy Expiration Date: ____/_____/ _____

What are you requesting? (Check all that may apply):

Lease/Finance ( ) Purchase/Cash/1-Pay ( ) Preowned ( ) Consignment ( ) Auction ( )

What is your time frame?

Immediately ( ) 1-3 Months ( ) 4-12 Months ( ) Researching Next Vehicle ( )

Authorized Signature: _____ Date: _____

Print name: _____

Disclaimer: If you are leasing or buying a vehicle through Diana Group LLC, a valid driver's license and current insurance is required upon delivery. Thank you in advance.

DGLLC: (818) 806-5197 Email: info@dianagroupllc.com Website: http://www.dianagroupllc.com

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