CATHEDRAL CONSULTING GROUP, LLC
Est.2004 10th Anniversary

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MEMBERSHIP PROFILE and APPLICATION for LEASING COMPETITIVE EDGE

[Revised: May 2015]

The following information will be used to assist Cathedral Consulting Group, LLC in evaluating the demographic and characteristic information about individuals seeking membership in the Leasing Competitive Edge 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.

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

Company Information:

Company Name: _____

Company Address: _____

City, State, Zip: _____

Main Telephone: _____ Fax: _____

Company's Website address: _____

Hours of Operation: from _____ to _____ No. days: **5 6 7**

Number of years company in leasing business: _____

Affiliated New Car franchises:_____

Other leasing locations:_____

Candidate's e-mail address_____

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

Type of Company: *As of __/__/_____

1. Size of Portfolio(s), and Current Monthly Volume:

	# of Active Units	% of Bus.
In-House Vehicle Leases:	_____	_____
Equipment Leases:	_____	_____
Daily Rental:	_____	_____
Brokered Leases:	_____	_____

Describe other type of lease company related auto/equipment leasing activity that exists:

	Monthly Volume / Annual Dollar Sales / or "Other"
H/D Truck Leases:	_____
Used Car Sales:	_____
New Car Sales:	_____
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: a) Primary Marketing Area(s):

   b) Typical Prospect Profile:

Name of Principals and Other Employee Information:

Owner / Officer / Manager (1): _____ Title: _____ Years with company:_____

Owner / Officer / Manager (2): _____ Title: _____ Years with company:_____

Owner / Officer / Manager (3): _____ Title: _____ Years with company:_____

Owner / Officer / Manager (4): _____ 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:_____

PLEASE COMPLETE INFORMATION ON NEXT PAGE

Sales Trends and Other Marketing Information:

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

Network? ☐ YES ☐ NO

Applicant Information:

Applicant's Name: _____

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 Leasing Competitive Edge Study Group program?

14. Have you ever been a member of a study group? _____ If yes, to which group? _____

15. Please list any lease, or vehicle-related 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 the Leasing Company)

Application Date: _____

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

☐
(Please check the box above to affirm the Application)