LOCAL RENTER FORM

 \Box A \Box B \Box X

TO BE COMPLETED IN FULL BY THE RENTER		
SURNAME:	FIRST	NAME:
ADDRESS:		
DATE OF BIRTH:	MOBILE PH:	ALT PH:(optional)
PROFESSIONAL DETAILS		
EMPLOYER NAME:		
EMPLOYER ADDRESS:		
JOB TITLE:	BUSINESS PH:	PERIOD EMPLOYED:
ADDITIONAL CONTACT DETAILS		
CONTACT NAME # 1:	PH:	RELATIONSHIP TO RENTER
CONTACT NAME # 2:	PH:	RELATIONSHIP TO RENTER
DECLARATION: I confirm that the above infor the purpose of evaluating and assessing my a	mation is correct. I authorise the applicabl pplication for a vehicle rental, and I author quest access to and correction of personal	of solicitation or promotion of Avis Budget Group products or services. e rental car company to collect, use and disclose information about me for ise any third person to provide information about me for that purpose. I information which the applicable rental car company holds about them.
	TO BE COMPLETE BY ST	
		NSE NAME:
DRIVERS LICENSE ADDRESS: DRIVERS LICENSE EXPIRY:		ISSUING STATE (AU ONLY):
SECOND FORM OF IDENTIFICAT e.g. Copy of utilities bill, home phone / broadb		issued within the last 30 days.
VENDOR NAME:	VENDOR ADI	DRESS:
	VERIFICATION CH	ECKLIST
Copy of Driver's license obtained?	☐ Yes ☐ No	
Obtained copy of second form of identification	n? ☐ Yes ☐ No	
Address details match all ID provided.	☐ Yes ☐ No	
Phone numbers checked.	☐ Yes ☐ No	
Current QLD license? (QLD only)	☐ Yes ☐ No	
Complete check: 'QLD transport licence status' 'web:	site. Refer to Duty Manager	
DATE:	RENTAL SALES AGENT SIGNATURE:	
DATE:	MANAGER/SUPERVISOR SIGNATURE:	