

Longview
 511 W. Marshall
 Longview, TX 75601
 (903) 234-2144



**TIRE TIME
 RENTALS**
Rent to Own Tires & Wheels

Tyler
 1801 W. Erwin
 Tyler, TX 75702
 (903) 595-3810
 FAX (903) 595-3910

Rental Order

Renters Full Name		Date of Birth	Social Security No.	Sex	Ht.	Wt	Eyes
Address City		State	Zip Code	Apt. No.	How Long	Ph# () Mes ()	
Landlords Name () Mortgage Co. ()		Address			Phone No.		
Previous Address		Renters Home Town & Contact There			Time in This Area		
Employer		Address		How Long There		Phone No.	
Supervisor		Your Occupation		Work Hours		Pay Day	
Renter's Auto, Year, Make & Model		Color		License Plate No.		Drivers License No.	
Purchased Car From		Financed With					
Girlfriend/Boyfriend		Address			Phone No.		
Co-Renter's Full Name		Date of Birth	Social Security No.	Sex	Ht.	Wt.	Eyes
Employer		Address		How Long There		Phone No.	
Supervisor		Your Occupation		Work Hours		Pay Day	
Co-Renter's Auto, Year, Make & Model		Color		License Plate No.		Drivers License No.	
Previous Address		Co-Renters Home Town & Contact There			Time in This Area		
G F P <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Reference (Renters Closet Relative)	Address		Relationship		Phone Number	
G F P <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Reference (Co-Renters Closet Relative)	Address		Relationship		Phone Number	
G F P <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Reference (Renters Closet Relative)	Address		Relationship		Phone Number	
G F P <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Reference (Renters Closet Relative)	Address		Relationship		Phone Number	
Signature _____							
Comments _____							
What Brought You Into This Store? <input type="checkbox"/> TV - What Channel? _____ <input type="checkbox"/> Radio - What Station? _____ <input type="checkbox"/> Door Flyer <input type="checkbox"/> Direct Mail <input type="checkbox"/> Shopper Magazine <input type="checkbox"/> Yellow Pages <input type="checkbox"/> Appearance <input type="checkbox"/> Friend - Their Name: _____							