

EMPLOYEE ATTESTATION

- Employer coordinates -

Company Name :				UID Number :	
Adress :		ZIP Code :		City :	
Contact :		Phone :		E-Mail :	

- Coordinates employees -

Company Name :				E-Mail :	
Adress :		ZIP Code :		City :	
Purchases for :	Private (1) or Business (2) Use	Model :		VIN Number :	

- Employer confirmation -

Private Use (1)	The above-mentioned employer confirms that the above-mentioned employee has a permanent employment contract and is NOT entitled to a company vehicle and/or compensation for the use of a vehicle and/or a corresponding kilometre allowance. => APPLICATION OF THE PRIVATE SALES ACTIONS
Business Use (2)	The above-mentioned employer confirms that the above-mentioned employee has a permanent employment contract and is entitled to a company vehicle and/or compensation for the use of a vehicle and/or a corresponding kilometre allowance.
Place & Date :	Legally valid signature & stamp
_____	_____

With this signature we confirm that the above information is true at the time of signature. If the information is not true, the delivering dealer reserves the right to charge the customer for the fleet discount and any costs incurred. Furthermore, we confirm that FCA Switzerland SA may inform us on a quarterly basis about the current fleet conditions and any special offers concerning our customer group.

Please keep the completed form for audit purposes on

Reserved for the dealer :

We confirm with this signature that the above-mentioned person is eligible for the fleet conditions of FCA Switzerland.

Dealer Code :	Place & Date :	Legally valid signature & stamp
