

Enrollment Form

FOR OFFICE USE ONLY				
CB#				
MSR				
Promo				
Date Received				

Business Name				
Street Address				
Street	City	State	Zip	
☐ Same as Street Address				
Mailing AddressStreet				
Street	City	State	Zip	
Send rebate checks to $\ \square$ Street Address $\ \square$ Mailing A	Address			
Business Phone	Business Fax			
Member Name	Member Email			
		_	_	
Industry Served:	Do you repair yo	our own fleet? 🗌 Ye	es 🗌 No	
☐ Agricultural Materials/Products		_	_	
☐ Building Materials	Do you repair of	Do you repair others' fleets? 🗌 Yes 🗎 No		
☐ Construction/Excavating			_	
☐ Foodservice/Grocery Wholesale/Beverage	Total number of	Total number of power units in your fleet		
☐ Fuel Hauler/Petroleum				
☐ General Freight				
☐ Home Heating Fuels/Propane				
☐ Moving/Storage				
☐ Stone/Aggregate				
□ Other				
Cianatura	Data			

Once your form is completed, send it to us:

MAIL P.O. Box 5287, Oak Brook, IL 60522-5287 | FAX 877-844-5447

EMAIL truckrebates@consolidatedfleetsolutions.com | TEXT 630-724-7554

UNDERSTANDING YOUR MEMBERSHIP

With Consolidated Fleet Solutions (CFS) you will never have an out-of-pocket expense and you choose only the programs you want to use! Rebate checks are issued quarterly based on purchases made by the member. CFS is authorized to collect your purchase details for the sole purpose of verifying and calculating your quarterly rebate totals. Membership fee structure can be found at www.consolidatedfleetsolutions. com. If rebates are not earned in any particular quarter, membership fees will not apply. Member discharges CFS from all claims arising out of a vendor's non-payment of rebates. CFS or the member may discontinue membership at any time.