

LeaseDirect Business Application

2949 – 17th Avenue SE, Suite 111, Calgary, AB T2A 0P7 * Fax: 1-888-398-2236

DATE:		LEGAL BUSINESS NAME		OPERATING AS		YEARS IN BUSINESS	
STREET ADDRESS			CITY/TOWN		POSTAL CODE		CONTACT
TEL. ()		FAX. ()		CELL: ()		MAILING ADDRESS IF DIFFERENT FROM ABOVE	
Company Gross Sales Per Year:				Company Net Income Per Year:			
TYPE OF BUSINESS:						INCORP. DATE	

PRINCIPALS, OWNERS, SHAREHOLDERS

NAME	Home Address:	SIN ____ - ____ - ____	Home Telephone.
	City:		()
	Postal Code:	DATE OF BIRTH:	Cell:
	Own ____ Rent ____ Other ____	____ / ____ / ____	()
	Value of house _____	YEAR MONTH DAY	
NAME	Home Address:	SIN ____ - ____ - ____	Home Telephone.
	City:		()
	Postal Code:	DOB:	Cell:
		____ / ____ / ____	()
		YEAR MONTH DAY	

PERSONAL/TRADE REFERENCES

1	ADDRESS	TEL. #	FAX #
2	ADDRESS	TEL #	FAX #

TOTAL PURCHASE PRICE	DOWN PYMT/TRADE VALUE	PAYMENT AMOUNT	TERM
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EQUIPMENT DESCRIPTION

THE UNDERSIGNED CERTIFIES and confirms that the information you have given us in respect of this application is true and complete, and you authorize us to rely on and use this information in order to confirm your identity, evaluate your credit worthiness, in relation to the financing contract being entered into. In particular, you agree that we, our affiliates and any third parties acting for us or on our behalf (hereinafter collectively "us", "we" or "our"), may obtain a credit report or other credit information from any credit reporting agency, credit bureau or credit grantor, and may hold, use, exchange and disclose such information for the purposes identified above. If your application is approved, you authorize us to collect, hold, use, exchange and disclose your personal information as required, in order to administer your contract, determine your insurance eligibility, and secure the assets being financed, or as required or permitted by law. We will keep a file containing some or all of your personal information in digital format. You have a general right to access and rectify the personal information in this file by making a written request, Attention: LeaseDirect Canada Corporation, Privacy Office

AUTHORIZED SIGNATURE _____ DATE _____ 20 _____

AUTHORIZED SIGNATURE _____ DATE _____ 20 _____

LeaseDirect Personal Statement

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NAME		S.I.N.#		DATE OF BIRTH (YYMMDD)		# OF DEPENDANTS	
HOME ADDRESS		CITY & PROVINCE	POSTAL CODE	PHONE # ()		MONTHLY RENT	HOW LONG
PREVIOUS ADDRESS IF LESS THAN 2 YRS		SPOUSE'S NAME		S.I.N. #		BIRTH DATE	
EMPLOYER		ADDRESS		PHONE	POSITION	HOW LONG	
PREVIOUS EMPLOYER IF LESS THAN 2 YRS.		ADDRESS		PHONE	POSITION	HOW LONG	
SPOUSES EMPLOYER		ADDRESS		PHONE	POSITION	HOW LONG	
APPLICANT SALARY \$	SPOUSE SALARY \$		OTHER INCOME \$		TOTAL INCOME \$		
IF YOU HAVE \$ IN OTHER INCOME (LISTED ABOVE), EXPLAIN WHERE THIS COMES FROM:							
BANK	BRANCH		CONTACT	PHONE #		FAX #	

ASSETS	VALUE		LIABILITIES	PAYMENT	BALANCE
REAL ESTATE HOME	\$		MORTGAGE	\$	\$
REAL ESTATE Specify:	\$		MORTGAGE	\$	\$
OTHER Specify:	\$		OTHER	\$	\$
VEHICLES (1) Year & Make	\$		LOAN Specify:	\$	\$
(2) Year & Make	\$		LOAN Specify:	\$	\$
CASH	\$		CREDIT CARDS	\$	\$
STOCKS, BONDS, ETC.	\$		OTHER DEBT.	\$	\$
MISC. Specify:	\$		PERSONAL GUARANTEES?	\$	\$
TOTAL ASSETS	\$		TOTAL LIABILITIES	\$	\$
NET WORTH	\$				

Prior Bankruptcy : Yes ___ No ___ Judgment Enforcements Yes ___ No ___
Collection Activity Yes ___ No ___ Any other businesses Yes ___ No ___

PERSONAL REFERENCES		
Name _____	Address _____	Tel _____
Name _____	Address _____	Tel _____

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APPLICANT SIGNATURE

DATE

CO-APPLICANTS SIGNATURE

DATE