

Application Statement

LEASE RETAIL OTHER

	CHECK ONE APPLICABLE BOX (PRIMARY APPLICANT AND JOINT APPLICANTS MUST COMPLETE SEPARATE FORMS): If Joint Applic											ent Relat	ionshin to	
									Applica					
		Application is for joint credit with primary applicant or as a guarantor									– Spou	ouse F – Family		
		Primary applicant is relying on you for income for alimony, child support, or separate maintenance or on your income or assets as the basis for repayment of the credit requested										er		
	Last Name First Name				Middle Initial			Jr. Sr.	No. of E	o. of Dep. Date of Birth (mm/dd/yyyy)			l/yyyy)	
	Pre	esent Address (Num	ober and Street)	City			Sr.	Province Postal Code				ode		
A P	A													000
P L	Area Code and Phone Number									Lived ThereMos.				
I C														
A N T	Social Insurance Number Driver's License Number Province													
Т	E-Mail Address Home Work													
	Name and Address of Landlord or Mortgage Holder										Monthly Rent / Mortgage \$			
	Previous Address (Street, City, Province and Postal Code) (if less than 2 years at present address)										Lived ThereYrsMos.			
E M	Current Employer Name City Province													
P L O	Applicant's Occupation				Work – Area Code and Phone Number Gross Sa \$				ss Salary	,	W – Weekly Y – Yearly M – Monthly			
Y M	Time on Job * Alimony, child support or separate maintenance income need not to be revealed if you do not wish to have it				* Source of Other Income			her Incor	= "			N – Weekly		
E N T	YrsMos. considered as a basis for repaying this obligation. Previous Employer's Name (if less than 5 years at current employer) City Province											Time on previous job		
_	Name of Bank Account # 1 Chequing & Savin										Savin	gs 3	Savings	
	Address of Bank				2					Chequing & Savings 3 Savings Only Chequing Only 4 No Account				
	Have You Ever Had a Car or Other Merchandise Repossessed? No Yes ⇒ If Yes, When? Month: Year:													
	Have you Ever Filed Bankruptcy? No Yes ⇒ If Yes, When? Month: Year:													
C R	Is Applicant Obligated to Make Alimony, Child Support or Separate Maintenance Payments? No Yes ⇒ If Yes, Amount to Be Paid per Month is \$													
E D	Creditor's Name and City/Province			Account Number Date Op (mm/dd		ened High Credit			Monthly Pmt Amount		npaid Ilance	Date of Las		
I T	1	(Current / Previous	Cars Financed by or Leased Through)			(11111 00)	,,,,,			ranount		iidiioc	(mmada)	<i>))))</i>
D A	2													
T A	3	(Other)												
	Personal References					Area Code and Phone N			ne Numb	per Re	er Relationship			
	2						Area Code and Phone Number Relati				elations	onship		
	3	3						Area Code and Phone Number Rel			elationship			

You certify 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.

This consent form is valid from today's date, and remains in effect until the lease contract, personal loan, or promissory note expiration. If no loan or lease is advanced this credit application will be destroyed and the consent will be no longer valid.

Applicant Signature:	Date:	