



COMMERCIAL LEASING APPLICATION

BUSINESS TYPE (check one)

☐ Proprietorship ☐ Partnership ☐ Corporation

Full Legal Name

Operating Name

Address

City

Province

Postal Code

Daytime Telephone

Mobile

Years in Business

Contact

Email

PRINCIPAL

☐ Married

Last Name

First Name

Home Address

City

Province

Postal Code

Date of Birth

SIN

Annual Salary

☐ Own Home

☐ Rent

Mort/Rent PMT

Value of Home

Mort. Balance

VENDOR AND EQUIPMENT

Dealer Name

Email

Sales Rep

Equip. Cost (Approx.)

Term Requested

Equipment Description

Down Payment Available

Leaseline is a trade name of Leaseline Financial Services Corp (herein "Leaseline"). The undersigned certifies to Leaseline that the above information, as well as any other information provided to Leaseline or its agents from time to time, is true and correct and may be used in connection with this credit application and any subsequent finance arrangement. Moreover, the undersigned authorizes and consents to Leaseline's collection, use and disclosure of any such information in accordance with Leaseline's Privacy Policy which includes, but may not be limited to, requesting credit information from one or more credit reporting agencies and disclosing all such information, correspondence and communication contemplated herein to one or more lenders and/or financial institutions and their agents for the purpose of arranging financing. The undersigned further authorizes and consents to Leaseline saving all information, correspondence and communication from its customers for ongoing auditing, compliance and marketing purposes. Authorization and consent provided by digital means, including our online application form or a digital signature as an example, will be deemed to have the same force and effect as written Authorization.

Date

Signature

Your LeaseLine Representative,

Greg Ganske

203 - 540 Lawrence Avenue, Kelowna, BC V1Y 6L7

Phone: 250-448-7400, ext 110 / 1-800-288-7875

Direct: 825-475-5588 / Fax: 1-800-218-7875

greg@leaseline.com / www.leaseline.com



Greg Ganske

Phone: 250-448-7400, ext 110

Direct: 825-475-5588

PERSONAL NET WORTH STATEMENT

ASSETS	VALUE		LIABILITIES	AMOUNT OWING
CASH & INVESTMENTS	VALUE		CREDIT CARDS	AMOUNT OWING
Cash	<input type="text"/>	1.	<input type="text"/>	<input type="text"/>
RRSP	<input type="text"/>	2.	<input type="text"/>	<input type="text"/>
Stocks/Bonds	<input type="text"/>	3.	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	4.	<input type="text"/>	<input type="text"/>
BUSINESS ASSETS	VALUE		BUSINESS LIABILITIES	AMOUNT OWING
Cash	<input type="text"/>		Accounts Payable	<input type="text"/>
Receivables	<input type="text"/>		Business Debt	<input type="text"/>
VEHICLES	VALUE		VEHICLE DEBT	AMOUNT OWING
Make and model (below)			Lender (below)	
1. <input type="text"/>	<input type="text"/>	1.	<input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	2.	<input type="text"/>	<input type="text"/>
REAL ESTATE	VALUE		MORTGAGE DEBT	AMOUNT OWING
Address (below)			Lender (below)	
1. <input type="text"/>	<input type="text"/>	1.	<input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	2.	<input type="text"/>	<input type="text"/>
OTHER ASSETS	VALUE		OTHER DEBT	AMOUNT OWING
1. <input type="text"/>	<input type="text"/>	1.	<input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	2.	<input type="text"/>	<input type="text"/>
TOTAL ASSETS	<input type="text"/>		TOTAL LIABILITIES	<input type="text"/>

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Date of Birth (MM/DD/YYYY)	<input type="text"/>	SIN	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Print Name (Above)	Signature	Date	Place (City, Prov.)