

**BUSINESS TYPE (check one)****COMMERCIAL LEASING APPLICATION** Proprietorship Partnership Corporation

Full Legal Name		Operating Name		
<input type="text"/>		<input type="text"/>		
Address		City	Province	Postal Code
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
Daytime Telephone	Mobile	Years in Business		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Contact	Email			
<input type="text"/>	<input type="text"/>			

PRINCIPAL Married

Last Name		First Name		
<input type="text"/>		<input type="text"/>		
Home Address		City	Province	Postal Code
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth		SIN		
<input type="text"/>		<input type="text"/>		
Annual Salary	<input type="checkbox"/> Own Home	Mort/Rent PMT	Value of Home	Mort. Balance
<input type="text"/>	<input type="checkbox"/> Rent	<input type="text"/>	<input type="text"/>	<input type="text"/>

VENDOR AND EQUIPMENT

Dealer Name		Email		
<input type="text"/>		<input type="text"/>		
Sales Rep	Equip. Cost (Approx.)	Term Requested		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Equipment Description		Down Payment Available		
<input type="text"/>		<input type="text"/>		

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
<input type="text"/>
Signature
<input type="text"/>

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

TOTAL LIABILITIES

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Date of Birth (MM/DD/YYYY) SIN

Print Name (Above) Signature Date Place (City, Prov.)