



COMMERCIAL CREDIT APPLICATION

Business (check one) Proprietorship Partnership Corporation

Full Legal Name: _____
 Operating Name: _____ Website: _____
 Address: _____ City: _____
 Province: _____ Postal Code: _____ Contact: _____
 Tel: _____ Fax: _____ Cell: _____ Email: _____

of full time Employees: _____ Yrs in business: _____ Estimated Annual Sales: _____
 Est Annual Profits: _____ Type of Business: _____

If your business is less than 3 years old, it is a partnership or proprietorship or you employ less than 5 employees please complete the Applicant information section below.

Applicant Information

Last Name: _____ First Name: _____
 Date of Birth: _____ Sin : _____ Email: _____
Month/Day/Year

Home Address: _____ Yrs. At Address: _____
 City: _____ Province: _____ Postal Code: _____
 Own Home Rent Monthly Mortgage or Rent Pmt: _____

Cash : _____
 Value of home: _____ Mort Balance: _____
 Value of vehicle: _____ Owing on Vehicle: _____
 Total assets: _____ Total Liabilities: _____

Co - Applicant Information

Last Name: _____ First Name: _____
 Date of Birth: _____ Sin : _____ Email: _____
Month/Day/Year

Home Address: _____ Yrs. At Address: _____
 City: _____ Province: _____ Postal Code: _____
 Own Home Rent Monthly Mortgage or Rent Pmt: _____

Cash : _____
 Value of home: _____ Mort Balance: _____
 Value of vehicle: _____ Owing on Vehicle: _____
 Total assets: _____ Total Liabilities: _____

Vendor And Equipment Information

Vendor Name/Branch: _____ Sales Rep: _____
 Phone #: _____ Fax #: _____ Email: _____

Equipment Description: _____ New Used -Age _____
 Equipment cost : _____ Term Requested _____ Quote Attached Yes No

IMPORTANT INFORMATION ABOUT ESTABLISHING A RELATIONSHIP WITH CERTALIFT, LTD.

I hereby authorize Certalift, LTD. and/or their designated agent or lender ("Creditor") to investigate my credit record and to establish and maintain a file of personal information about me. I consent to Creditor obtaining consumer reports and other credit information from, and disclosing consumer reports and other credit information to, credit reporting agencies, the credit bureau, any person or corporation with whom or which I have had financial relations and suppliers of services such as collection agencies or bailiffs. I consent to this collection, use and disclosure of consumer reports and other credit information for the purposes of: accessing my creditworthiness in connection with financing transactions, making a decision about my credit application; monitoring, evaluating, servicing and collecting my account; and responding to inquiries about my application, account or file. I understand that the provision of my Social Insurance Number ("SIN") is optional and that the processing of my credit application is not conditional on my providing my SIN. I understand that choosing not to provide my SIN is likely to increase the time required to process my application and may result in Creditor not receiving current and accurate information about my credit rating. I have obtained, read and understand the Privacy Law Information Sheet attached hereto.

By signing, I confirm that I have read and understand the content of the Privacy Law Information Sheet and this Credit Application.

Signature (1): _____ Signature (2): _____
 Date: _____