

Personal And Small Business Credit Application

Business Name: _____ **Years in Business:** _____
Address: _____
City/Province: _____ **Postal Code:** _____
Telephone: (____) _____ **Fax:** (____) _____ **Contact:** _____
Type of Business: Sole Proprietorship ☐ Partnership ☐ Corporation ☐ Subsidiary ☐
Officers: President / Owner: _____ VP/Secty Treasurer: _____

Personal Information

Name: _____ **D.O.B. (MM/DD/YY):** _____ **S.I.N.:** _____
Address: _____ **City/Province:** _____ **Postal Code:** _____
Home Phone: (____) _____ **Bus. Phone:** (____) _____

Years at present address: ____ **Previous address if less than 2 yrs:** _____
Present Address: _____ **City/Province:** _____ **Postal Code:** _____
Monthly Rent/Mortgage: \$ _____ **Mortgage Balance:** \$ _____ **Value of Property:** \$ _____
Name of Landlord if rent: _____
Present Employer: _____ **Phone:** (____) _____ **How long:** ____ yrs
Gross Monthly Income: \$ _____ **Occupation:** _____
Previous Employer if less than 2yrs: _____ **Phone:** (____) _____
Spouse's Employer: _____ **Phone:** (____) _____ **How long:** ____ yrs
Gross Monthly Income: \$ _____ **Occupation:** _____ **Spouse's S.I.N.:** _____
Have you ever filed for Bankruptcy? No ☐ Yes ☐
Details: _____

Do you have any Claims/Judgments Registered against you? No ☐ Yes ☐
Details: _____

Bank References On Primary Borrower:

Bank Name: _____ **City:** _____ **Province:** _____
Contact: _____ **Phone:** (____) _____ **Acct. #** _____

I certify the above information to be true and correct. The undersigned consents to the obtaining of such information from any credit reporting agency or other source as may be required at any time in connection with the credit hereby applied for or any renewal or extension thereof and to the disclosure of any information concerning the undersigned to any credit reporting agency or to any person with whom the undersigned has or proposes to have financial relations.

Name: _____
Authorized Signature: _____