

Lease Application Form

Leasing Company:

Name:

Address:

Tel:

Fax:

1. General Information

Name of Firm:

Years of Operation:

Trade Style:

Date of Incorporation:

Address:

of Employees:

Town / City

Province / State:

Postal Code / Zip Code:

Country:

Tel.:

Fax:

e-mail:

Web site : www.

Nature of Business:

2. Bank Information

Bank and Branch:

Line of Credit? Yes or No (circle)

Bank Officer:

Account no.

Tel.:

Fax:

3. Trade Reference

Credit

Contact:

Tel.:

Fax:

- 1.
- 2.

4. Principal Information (required if cie incorporated 3 years or less, is not incorporated or has less than 6 employees)

Name of Individual:

Birth Date (m/d/y):

Social Insurance #:

Home Tel.:

Home Address:

Own or Rent? (circle)

Monthly Pymt?: \$

Town / City:

Province / State:

Postal Code / Zip Code:

Country:

Assets:

Liabilities:

Previous address (if less than 1yr):

Previous employer:

of years:

Position:

Bank and Branch:

Tel.:

Credit Reference:

Contact:

I CONSENT TO A CREDIT CHECK - Signature:

5. Equipment to be leased

Write description OR fax supplier quote

1. _____
2. _____
3. _____

Price: _____

Term: _____

Purchase Option: _____

Other: _____

SUPPLIER

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