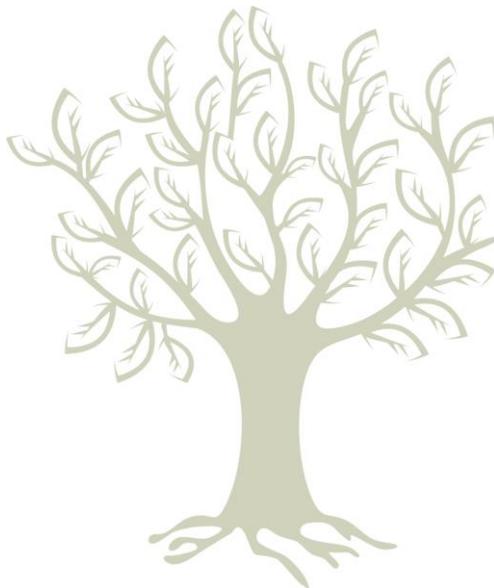


CO- APPLICANT/GUARANTOR PROGRAM APPLICATION

REMEMBER.....

- To fully complete each page of the Co-Applicant/Guarantor Application.
- To sign application.



Co-Applicant/Guarantor Personal Information:

First/Last Name: _____

Business Partner(s) Name(s): _____
(If this business is to be a partnership, please provide the personal details as below for the individuals.)

Home Phone #: _____ Cell or Toll Free #: _____

Fax #: _____ Email address: _____

Physical Address: _____

City: _____ Province: _____

Mailing Address: _____ City: _____ Province: _____

Postal Code: _____

Applicant's Birth Date: _____ (day-month-year)

Applicant's SIN #: _____

Identification: _____ (identify type)

Employer: _____

Applicant General Information: (If you answer 'YES' to any of these questions, please provide details).

Have you ever had an asset repossessed?	Yes	No
Are you involved in any claims or lawsuits?	Yes	No
Have you ever declared bankruptcy?	Yes	No
Do you owe any back taxes or other debt to the Federal Government?	Yes	No

Please Circle.

Marital Status: Married Single Separated Divorced Widow Common Law

Age Group: Less than 18 19-24 25-29 30-39 40-45 46-59 60+

Are you the primary wage earner? Yes No

Are you of aboriginal status? Yes No

Are you a person with disabilities? Yes No

Are you of visible minority status? Yes No

Number of children/dependents: _____ Their Ages: _____

References:

Please supply three (3) **PERSONAL** references. Include both family and non-family references.

1. Name: _____ Relationship: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____

2. Name: _____ Relationship: _____

Address: _____

City: _____ Province _____ Postal Code: _____

Phone: _____

3. Name: _____ Relationship: _____

Address: _____

City: _____ Province _____ Postal Code: _____

Phone: _____

Personal Net worth Statement

Assets List and Describe all assets		Liabilities List credit cards and other liabilities including alimony and child support.	
Cash – Bank	\$ _____		Balance Owing
Cash – Other Institutions	\$ _____	Bank Loan(s) Schedule F	\$ _____
Life Insurance: Schedule C	\$ _____	Mortgages on Real Estate	\$ _____
Schedule D	\$ _____	Schedule B	\$ _____
Schedule A	\$ _____	Credit Cards	
Accounts & Loans Receivable		1. _____	\$ _____
1. _____	\$ _____	2. _____	\$ _____
2. _____	\$ _____	3. _____	\$ _____
3. _____	\$ _____	Other Obligations	
Automobiles: Make/Yr _____	\$ _____	1. _____	\$ _____
Make/Yr _____	\$ _____	2. _____	\$ _____
Real Estate: Schedule B	\$ _____	3. _____	\$ _____
Business Interests: Schedule E	\$ _____		
Other Assets:		(B) Total Liabilities	\$ _____
1. _____	\$ _____	(C) Net Worth (A minus B)	\$ _____
2. _____	\$ _____	Sundry Obligations:	
3. _____	\$ _____	Are you personally supporting contingent obligations not listed above (i.e., co-sign, guarantor/endorser)? Yes No	
(A) Total Assets:	\$ _____	If yes, please indicate liability and provide details on amount, to whom and nature of obligations below:	

Monthly Income and Expenses

Your gross monthly income:		Your monthly expenses:	
Monthly salary or wages	\$ _____	Mortgage/Rent	\$ _____
Commission/Bonuses	\$ _____	Real estate taxes	\$ _____
Dividends/Interest	\$ _____	Federal & Provincial Income Taxes	\$ _____
Rental income (Schedule B)	\$ _____	Insurance premiums	\$ _____
Other income	\$ _____	Credit Cards	\$ _____
Sub-Total	\$ _____	Consumer loan payments	\$ _____
Spouse's Gross Income:		Alimony/Child Support Payments	\$ _____
Monthly salary or wages	\$ _____	Food	\$ _____
Other Income	\$ _____	Clothing	\$ _____
Total Monthly Income	\$ _____	Transportation	\$ _____
		Utilities	\$ _____
		Entertainment	\$ _____
		Total Monthly Expenses	\$ _____

RELEASE, INDEMNITY, WAIVER AND CONSENT

RELEASE:

In consideration of Community Futures Boundary directly, or through its contractors or agents engaged on that behalf, providing to the undersigned financial assistance and/or counselling or business advisory services in connection with the organization and operation of the business of the Undersigned, the Undersigned, on their own behalf or by its duly authorized signatories, does hereby release and absolutely discharge Community Futures Boundary and each of its officers, employees, and its contractors and agents from any and all claims howsoever arising in tort, contract and otherwise, in respect of any and all loss, damage, cost or expense arising out of any activities coordinated or services provided by Community Futures Boundary, its officers, employees, contractors and agents, and whether or not any such loss, damage, cost or expense arises in whole or in part from the negligence or neglect of Community Futures Boundary, its officers, agents or employees, or contractors or any one or more of them acting together or alone.

INDEMNITY:

And the Undersigned hereby covenants and agrees to indemnify and save harmless Community Futures Boundary and each of its officers, agents and employees and contractors from and against any and all claims, actions, causes of action (including with limitation any claim, action or cause of action with respect to the operation or failure of the business of the Undersigned), demands, costs, charges or expenses in respect of any and all loss or damage suffered by or happening to the Undersigned arising out of or in any way attributable to the activities coordinated or services provided by Community Futures Boundary, its officers, agents, employees, or contractors or otherwise, howsoever.

WAIVER:

The Undersigned hereby waives any and all rights, which it now has or may in the future have to claim against Community Futures Boundary, its officers, agents or employees or contractors arising out of or in connection with any of the activities or services provided by Community Futures Boundary, its officers, employees, agents or contractors.

2.

CONSENT:

The Undersigned acknowledge that in connection with their participation in the *Business Development Loans Program*, Community Futures Boundary may provide names of Undersigned and their business as participants to those Provincial and Federal Government Agencies who provide funding for the Program, and the Undersigned do specifically consent to that sharing of such information.

This Release and Indemnity shall be binding upon the Undersigned, and their respective successors and assigns.

Signature of Co- Principal or Additional Co-Signatory: _____

Print Name: _____

Date: _____