

PERSONAL INFORMATION

full legal name (please print all responses clearly)			no. of dependents	birth date (mm/dd/yy)	social insurance number	
spouse's full legal name				birth date (mm/dd/yy)	social insurance number	
home phone	fax	cell		email		
current address:		city	province	postal code	how long	<input type="checkbox"/> own <input type="checkbox"/> mortgage <input type="checkbox"/> rent <input type="checkbox"/> other
previous address (if less than two years)			province	postal code	how long	<input type="checkbox"/> own <input type="checkbox"/> mortgage <input type="checkbox"/> rent <input type="checkbox"/> other
name of nearest relative not in household			city	province	home phone	

GENERAL CORPORATE INFORMATION

legal name of business		contact	phone	fax
address		city	province	postal code
type of entity <input type="checkbox"/> corporation <input type="checkbox"/> partnership <input type="checkbox"/> proprietorship <input type="checkbox"/> other		years in business	shareholders + ownership %	

FINANCIAL AND LENDING INFORMATION

name of primary bank	branch location (branch #)	phone	nature of dealings
name of lending institution	branch location (branch #)	phone	nature of dealings
mortgage holder		phone	monthly mortgage payment \$
rrsp holder		phone	rrsp balance \$
have you done business with us before? <input type="checkbox"/> yes <input type="checkbox"/> no	any prior repossessions? <input type="checkbox"/> yes <input type="checkbox"/> no	are you involved in any pending lawsuits? <input type="checkbox"/> yes <input type="checkbox"/> no	have you ever declared bankruptcy? <input type="checkbox"/> yes <input type="checkbox"/> no
if you answered yes to any of the above, please explain below			

EMPLOYMENT INFORMATION

current employer	city	contact person	phone
position		how long	annual income \$
previous employer (if less than three years with current employer)	city	contact person	phone
spouse's employer		contact person	phone
spouse's position		how long	spouse's annual income \$
other sources of income			

CONTRACTS + OPERATIONS INFORMATION

type of operations	years in industry	equipment location (address)		phone
unit(s) will work for whom and where?		expected annual earnings?	unit(s) is a <input type="checkbox"/> replacement <input type="checkbox"/> addition	fleet size (# of units)
contracting with? (primary)	type of contract <input type="checkbox"/> written <input type="checkbox"/> verbal	contract length	contact person	phone/cell
				contract value \$
contracting with? (secondary)	type of contract <input type="checkbox"/> written <input type="checkbox"/> verbal	contract length	contact person	phone/cell
				contract value \$
contracting with? (other)	type of contract <input type="checkbox"/> written <input type="checkbox"/> verbal	contract length	contact person	phone/cell
				contract value \$

