

# APEC Leasing

# Credit Application Form

1680 Courtneypark Dr. E, Mississauga, L5T 1R4, ON  
 Tel: (905) 625-2225 Fax: (905)795-9775

### Company Information

Company Legal Name		Trade Name	
Address	City	Province	Postal Code
Contact Name	Title	Telephone	Fax
Industry	Years In Business	Type of Business <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship	
Landlord Name	Contact	Telephone	Fax
Bank Name	Branch	Contact	Account No
Address	City	Telephone	Fax

### Owner / Partner / Principal ( Please fill in one application per Applicant)

Name		SIN No.	Date Of Birth (M/D/Y)	Ownership %	
Address		City	Prov.	Postal code	Fax
Home Own <input type="checkbox"/> Rent <input type="checkbox"/> Other <input type="checkbox"/>	Value \$	Mortgage \$		Mortgage Holder	
Status Married <input type="checkbox"/> Single <input type="checkbox"/>	Dependants	Spouses Legal Name	Date Of Birth (M/D/Y)	SIN No.	
Bank Name	Branch	Contact	Account No.		
Address	City	Telephone	Fax		
Credit Card Grantor	Name on Credit Card	Credit Card Number	Expiry Date		

### Lease Details

Vendor, name and address	Contact	Telephone	Fax
Equipment Description		Equipment Cost ( Pre Tax) \$	Lease Term Requested

<b>X:</b>		<b>X:</b>	
Signature ( Company)	Date	Signature ( Personal)	Date