



Account Manager Contact Information:

Martin Ross
tel 1-866-764-5919
fax 1-866-431-2205

Sales Coordinator Contact Information:

CORPORATE CREDIT APPLICATION

1. SUPPLIER & TRANSACTION DETAILS

Date:		Supplier:	
Phone Number:		Fax Number:	Sales Rep Name:
Current National Leasing Customer? <input type="checkbox"/> Yes <input type="checkbox"/> No		Can National Leasing Contact the Customer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Equipment Description:			
Is the Equipment: <input type="checkbox"/> New <input type="checkbox"/> Used		Cost:	\$
Is the Equipment Affixed? <input type="checkbox"/> Yes <input type="checkbox"/> No		Soft Cost:	\$
Term:		Trade In:	\$
Purchase Option:		Trade Up:	\$
		Total:	\$

2. LESSEE DETAILS

Full Legal Name:		Phone Number:	
Operating Name:		Contact:	
<input type="checkbox"/> Ltd./Inc. Incorporation Date:	<input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <i>(please complete section 5 if a proprietorship or partnership)</i>	In Business Under Current Ownership Since: <i>(please complete section 5 if less than 2 years)</i>	
Type of Business:		Number of Employees:	
Address:			
City:		Province:	Postal Code:

3. BANK REFERENCE

Bank:	Branch:	How Long:
Contact:	Phone Number:	Account Number:

4. TRADE REFERENCES

Name & Address:	Contact:	Phone No.:
Name & Address:	Contact:	Phone No.:

5. PRINCIPAL/SHAREHOLDER DETAILS – If Partnership, Proprietorship or Incorporated for less than 3 years

Full Name (First Middle Last):		Full Name (First Middle Last):	
Personal Address:		Personal Address:	
Home Telephone:		Home Telephone:	
Percentage of Ownership:	Social Insurance Number:	Date of Birth:	Percentage of Ownership:
			Social Insurance Number:
			Date of Birth:

I/We, the applicant, principal and/or guarantor each:

- acknowledge that providing a social insurance number is optional and not a condition to obtaining a credit review;
- consent to the collection, use and disclosure of personal information for the purposes of credit adjudication by the Lessor and its funders and to enable the Lessor and its assignees to provide leasing services; and
- consent to the Lessor and its funders obtaining information from credit reporting agencies and listed references in connection with this application.

Signature _____ Date: _____

Signature _____ Date: _____