

TEL# (888)398-0014 FAX# (877)233-5915 info@easylendfinancial.com www.easylendfinancial.com 1211 Gorham Street, Unit #4 Newmarket, Ontario, L3Y 8Y3

## CREDIT APPLICATION FORM

## Name/Address Last: First: Middle Initial: Married/Single: Address: City: Postal Code: Phone: Province: Own/Rent: Value of Property: Mortgage: S.I.N. (optional) How Long There: Date of Birth: **Company Information** Legal Name of Business: In Business Since: Legal Form Under Which Business Operates: Corporation Partnership Proprietorship Address: City: Province: Postal Code: Phone: Sales: Website: Number of Employees: E-Mail Industry Business is In: **Equipment to be Financed/Leased** Model, Make, & Year: Cost: New Used [ Term: Address: City: Province: Postal Code: Sales Representative: Phone: The undersigned certifies that the above information to be true and correct. By signing below, I/we consent and authorize the following entity: 2356846 Ontario Inc. O/A Easy Lend and its representatives, at any time to obtain on an on-going basis, verify, use, communicate with and disclose to third parties (including credit reporting agencies, credit exchange, leasing brokers, and credit grantors on an on-going basis) any of my credit, financial, and personal information that 2356846 Ontario Inc O/A Easy Lend deems necessary to complete, service or enforce any lease, ancillary deed or transaction, including but not limited to assignments and securitizations. You/we authorize us to collect, hold, and disclose your personal information as requested in order to administer your contract & determine your insurance eligibility as required or permitted by law. You also authorize us to use your personal information for internal statistical analysis purposes. I have read and accepted this Disclosure Statement. Signature Date