

COMMERCIAL CREDIT APPLICATION

CUSTOMER INFORMATION:

Legal Corporate Name: _____

Trade Style: _____ No. of Years in Business: _____

Service(s) Conducted by Business: _____

Main Contact: _____ Title: _____

Address: _____ Suite: _____

City: _____ Prov: _____ Postal Code: _____ Co Web Site _____

Telephone: (____) _____ Fax: (____) _____ E Mail: _____

Business Type: Partnership: _____ Proprietorship: _____ Corporation: _____
 (Please complete Personal Net Worth Statement for Partnership & Proprietorship)

Do you own or Lease your premises OWN: _____ LEASE: _____

Mortgage Holder / Landlord	Address	Phone	Fax
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OWNERSHIP:

Name: _____ Title: _____ % Ownership: ____

Name: _____ Title: _____ % Ownership: ____

Name: _____ Title: _____ % Ownership: ____

MARKET PLACE: Please provide the following information on your three largest clients.

Name	Address	Years Dealing	% of your Annual Sales
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(1)

(2)

(3)

CREDIT INFORMATION:

Bank: _____ Branch: _____

Contact: _____ Account #: _____ Phone #: - _____

TRADE CREDIT SUPPLIERS:

Name	Address	Phone #	Fax #
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1.

2.

3.

PURCHASE DETAILS: VENDORS NAME:

EQUIPMENT DESCRIPTION – NEW or USED Year of Manufacture _ _ _ _

Qty () _____

Selling Price \$

TRADE INFORMATION:

Year / Make / Model: _____

Trade Allowance: \$ _____

Less Liens Owing \$ _____

Net Trade Value \$ _____

Lien Holder

REPAYMENT TERMS:

Total Term: _____ months Skip Payment: _____ Per Year

Months for Skip:

ADDITIONAL INFORMATION:

FOR TRANSACTIONS OVER \$25,000 FINANCIAL STATEMENTS FOR THE LAST THREE FISCAL YEAR ENDS. PLUS LATEST INTERIMS MUST BE SUBMITTED WITH THIS APPLICATION.

PLEASE PROVIDE ANY ADDITIONAL INFORMATION, ON SEPARATE FORM IF NECESSARY,

By submitting this credit application to QEF the Applicant authorizes QEF or it's assign to make inquires into the applicants credit background and to use the information obtained from either the applicant directly or other source in evaluating the extension of the credit to the applicant including determining the appropriate source of funding for any credit eventually provided. Applicant hereby acknowledges that any person who supplies misleading or misrepresented information for this purpose could, in addition to any civil liability be guilty of an offence under the Criminal Code of Canada

Signed

Date:

(For Proprietorships & Partnerships)

CONSENT RESPECTING PERSONAL INFORMATION

You confirm that the information you have given us in respect of this application is true and complete, and you authorize us to rely on and use this information in order to confirm your identity, evaluate your credit worthiness, in relation to the financing contract being entered into. In particular, you agree that we and any third parties acting as funder for us or on our behalf (hereinafter collectively "us", "we" or "our"), may obtain a credit report or other credit information from any credit reporting agency, credit bureau or credit grantor, and may hold, use, exchange and disclose such information for the purposes identified above.

If your application is approved, you authorize us to collect, hold, use, exchange and disclose your personal information as required, in order to administer your contract, determine your insurance eligibility, and secure the assets being financed, or as required or permitted by law. You also authorize us to use your personal information for internal statistical analysis purposes.

We will keep a file containing some or all of your personal information at 421 Whitney Ave Suite 412, Hamilton, ON L8s 2H6from time to time.

You have a general right to access and rectify the personal information in this file by making a written request to the above address.

Signature Signature Signature

Name Name Name

Date Date Date

SocInsNo SocInsNo SocInsNo

BirthDate Month Day Yr BirthDate Month Day Yr BirthDate Month Day Yr

Sign and complete the above information for each partner