

COMMERCIAL CREDIT APPLICATION

Company's legal Name:			
Trade Name:			
Address:	City:	Province:	Postal Code:
Contact:	Phone:	Fax:	Cell:
Email:		Number of Employees:	
Type of Business:		Years in Business:	Years of Experience:

Bank information

Bank Name:	Address:
Account Number:	Line of Credit (yes/no) limit \$:
Contact:	Phone Number:

Equipment Description

Equipment Type:		
Make:	Model:	Years:
Reason of the Acquisition:		
Vendor Name:		
Address:	Contact:	Phone Number:

Lease Detail

Equipment Cost:	Cash/Exchange :	Term Asked:
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Owner/Partner/Principal Information

Last Name:	First Name:		
Social insurance No:	Date of birth (M/D/Y):		
Address:	City:	Prov :	Postal Code:
Owner (yes/no):	If Yes/Value \$:	Mortgage balance \$:	
Have you ever declared bankruptcy?			
Do you have a judgment which prosecution against you?			

The undersigned and/or guarantor certifies the above information to be true and correct. By signing below, I consent and authorize Locations PMC Capital Inc and its representatives and other affiliation to obtain, verify, use, communicate whit, any credit report agency or financial institution and obtain or disclose any information of personnel or financial nature relating to the analysis of the quality of my credit.

Signature: _____ **Date:** _____