

CORPORATE CREDIT APPLICATION



NL Account Manager

Phone #

Fax #

Roz Kierstead

800 930 7555 X5056

866 537 2860

1. DETAILS OF TRANSACTION

| | | | |
|------------------------|-----------|-----------|--|
| Date | Equipment | | |
| 7-May-15 | | | |
| Vendor | Fax # | Sales Rep | |
| Invoice (before Taxes) | Term | Phone # | |
| Additional Information | | | |

2. COMPANY HISTORY

| | | | |
|--|---|-------------|------------------|
| Full Legal Name | Can we contact the customer? | | |
| | <input type="checkbox"/> No <input type="checkbox"/> Yes | | |
| Operating Name | <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Incorporated/Limited | | |
| Physical Address **** Required if address is a RR or P.O.Box # | Contact | | |
| Mailing Address | Phone # | | |
| City | Province | Postal Code | Type of Business |
| Email Address | Yrs in Business | | |

**** Note: If in business less than 3 yrs under current name, or Sole Proprietorship, please complete below

| Principals | Name | Social Insurance Number | Date of Birth | | |
|------------|------|-------------------------|---------------|----|----|
| | | | MM | DD | YY |
| 1. | | | | | |
| 2. | | | MM | DD | YY |

3. MAJOR TRADE REFERENCES

| | | |
|------------|-------|--------------|
| Trade Name | Phone | Contact Name |
| | | |
| Trade Name | Phone | Contact Name |
| | | |

I/We, the applicant, principal and/or guarantor, 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
- * the Lessor and its funders obtaining information from credit reporting agencies and listed references in connection with this application

Verbal Consent

**** NOTE for all applications requiring personal data, the applicant must sign this form, or if taken via telephone the above consent statement must be read to applicant and their verbal consent must be obtained

Signature of Applicant: _____

Date: _____

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