

APPLICANT(S)

Buyer's Full name:	SIN:	Driver's License:	Birth Date:	Marital Status:	Phone:	Cell:
Present Address:			City:	Province:	Postal Code:	How Long:
Previous Address (if less than 2 yrs):			City:	Province:	Postal Code:	How Long:
Co-Buyer's Full name & Relation:	SIN:	Driver's License:	Birth Date:	Marital Status:	Phone:	Cell:
Present Address:			City:	Province:	Postal Code:	How Long:
Previous Address (if less than 2 yrs):			City:	Province:	Postal Code:	How Long:

INCOME(S)

Buyer's Employer:	Position & (F.T./P.T./Seasonal):	Phone:	Income:	How Long:
Address:		City:	Province:	Postal Code:
Previous Employer (if less than 2 yrs):	Position & (F.T./P.T./Seasonal):	Phone:	Income:	How Long:
Employee Benefit Program <input type="checkbox"/> Yes <input type="checkbox"/> No	Details:			
Other Income (describe):				
Co-Buyer's Employer:	Position & (F.T./P.T./Seasonal):	Phone:	Income:	How Long:
Address:		City:	Province:	Postal Code:
Previous Employer (if less than 2 yrs):	Position & (F.T./P.T./Seasonal):	Phone:	Income:	How Long:
Employee Benefit Program <input type="checkbox"/> Yes <input type="checkbox"/> No	Details:			
Other Income (describe):				

BANK

Primary Bank:	Branch:	Type(s) of Account(s):	Balance:
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ASSETS

Vehicles, Properties, Investments, RRSP's Insurance Policies, etc.	Value	Warranty	Pro Package (undercoating)

OBLIGATIONS

Own/Rent/Family R&B/ Other:		Mortgage Company:			
Present Value:	Balance Owing:	Payment:	Protected:	Life <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N	CI <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N
				A&H <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N	A&H <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N
Bank/Creditor	Type	Limit	Balance	Payment	Protected
					Life <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N CI <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N A&H <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N
					Life <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N CI <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N A&H <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N
					Life <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N CI <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N A&H <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N
					Life <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N CI <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N A&H <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N
					Life <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N CI <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N A&H <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N
Have you ever had an asset repossessed? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you declared Bankruptcy in the last 7 years? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Have you missed a payment or been late to pay your loan payment perhaps because of a sickness or injury in the past 7 years? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Total Monthly Income	× 40%	Monthly Obligation(s) – (loan, credit cards, rent/mortgage, etc.)		Affordable Payment	

SIGNATURE(S)

By signing this Application, you (the Applicant and each additional Co-Applicant) confirm that the information given is true and correct and you understand that it is being used to determine your credit responsibility and to evaluate and respond to your request for vehicle financing. The dealership and/or the finance institution is authorized to obtain any information required for these purposes from other sources (including, for example, credit bureau) and each source is hereby authorized to provide the dealership or financial institution with such information. You also understand, acknowledge and agree that the information given in the application form as well as other information obtained in relation to your credit history may be disclosed to potential lenders, other service providers, organizations providing technological or other support services required in relation to this application and any other parties with whom you propose to have a financial relationship.

_____ **X** _____ **X**
 Date Applicant's Signature Co-Buyer's Signature