



LEASE PLUS SERVICES INC.

Telephone: (403) 279-2119 Fax: (403) 279-2178

Toll Free: 1-888-330-7587

www.leaseplus.ca info@leaseplus.ca



Commercial Credit Application

(Please fax completed application to Lease Plus at (403) 279-2178)

COMPANY INFORMATION

DATE: _____

LEGAL BUSINESS NAME		PHONE () -	FAX () -
OPERATING AS		YEARS IN BUSINESS	DATE OF INCORPORATION
ADDRESS		E-MAIL	
CITY	PROVINCE	POSTAL CODE	
CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> OTHER <input type="checkbox"/> _____			

TRADE REFERENCES

COMPANY NAME	PHONE () -	CONTACT
COMPANY NAME	PHONE () -	CONTACT
COMPANY NAME	PHONE () -	CONTACT

BANKING INFORMATION

BANK NAME		HOW LONG AT THIS BANK
BRANCH ADDRESS		
CITY	PROVINCE	POSTAL CODE
ACCOUNT NUMBER	ACCOUNT MANAGER	
PHONE () -	FAX () -	

PRINCIPALS

NAME	TITLE	NAME	TITLE
PHONE () -	OWNERSHIP %	PHONE () -	OWNERSHIP %
ADDRESS		ADDRESS	
SIN - -	BIRTHDATE	SIN - -	BIRTHDATE

EQUIPMENT

VENDOR Motion Health Inc.		SALES REP	
EQUIPMENT DESCRIPTION (MAKE & MODEL)			
EQUIPMENT COST	TERM REQUESTED	PHONE (888) 611-2008	FAX (403) 251-9248
OTHER		<input type="checkbox"/> NEW <input type="checkbox"/> USED	

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 and evaluate your credit worthiness, in relation to the financing contract being entered into. In particular, you agree that we, our affiliates and any third parties acting 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.

SIGNATURE OF CLIENT(S): **X**

Suite 190, 7330 Fisher Street S.E. Calgary, Alberta T2H 2H8