

Business Application

Business Information

Company Name: _____ Operating As _____ Years in Business _____

Address: _____
 address city province postal code

Telephone: _____ Cell: _____ Fax: _____ Email: _____

Financing Request

Equipment: _____ Vendor: _____

Term Requested: _____ Purchase Price: _____

Principals and Owners Information

Name	SIN and DOB	Address & Telephone
1)	D.O.B YR _____ MN _____ DATE _____ SIN _____ - _____ - _____	
2)	D.O.B YR _____ MN _____ DATE _____ SIN _____ - _____ - _____	
3)	D.O.B YR _____ MN _____ DATE _____ SIN _____ - _____ - _____	

Estimated Business Network

COMPANY ASSETS	VALUE	AMOUNT OWING	TO	MTHLY PAYMENT
Company Real Estate	Worth \$ _____	Owing \$ _____	To _____	\$ _____
Equipment Year & Make	Worth \$ _____	Owing \$ _____	To _____	\$ _____
Equipment Year & Make	Worth \$ _____	Owing \$ _____	To _____	\$ _____
Equipment Year & Make	Worth \$ _____	Owing \$ _____	To _____	\$ _____
Equipment Year & Make	Worth \$ _____	Owing \$ _____	To _____	\$ _____
Other	Worth \$ _____	Owing \$ _____	To _____	\$ _____
Other	Worth \$ _____	Owing \$ _____	To _____	\$ _____
	TOTAL ASSETS \$ _____	TOTAL OWING \$ _____		\$ _____
Total Company Network				\$ _____

The Undersigned Certifies The Foregoing Information To Be True And Correct. We Consent To 4 Seasons Equipment and/or Infinity Leasing And Finance Inc. and/or Infinity Leasing Inc. Collecting And Using This Information In Order To Determine Our Credit Worthiness And Consent To The Disclosure At Any Time Of Any Information Concerning The Undersigned To Any Credit Reporting Agency Or Credit Grantor With Whom The Undersigned Or 4 Seasons Equipment and/or Infinity Leasing Inc. Has Financial Relations. I Acknowledge That If I Have Any Questions Regarding This Information I May Contact DonaldLaurin At 780.467.1416.

AUTHORIZED SIGNATURE _____ DATE _____ 20 _____