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## CREDIT APPLICATION

<b>Legal Name of the business:</b>			
Operating name:		Nature of Business:	
Address:			
Mobile:		Telephone:	
Years in business:		Email:	
Are there any legal actions against your company?		[ ] Yes [ ] No	
Have you ever had a commercial bankruptcy?		[ ] Yes [ ] No	
Will this be an	Add [ ]	Replacement [ ]	Refinancing [ ]

<b>Principal #1</b>			
Full Legal Name:			
Address:			
Telephone:		Mobile:	
Own Home [ ]	Rent Home [ ]	Monthly Rent:	Mortgage Balance:
S.I.N.:		DOB (DD/MM/YYYY):	
E-mail :			
Have you declared personal bankruptcy?		[ ] Yes	[ ] No
If YES, then date of discharge:			

<b>Principal #2</b>			
Full Legal Name:			
Address:			
Telephone:		Mobile:	
Own Home [ ]	Rent Home [ ]	Monthly Rent:	Mortgage Balance:
S.I.N.:		DOB (DD/MM/YYYY):	
E-mail:			
Have you declared personal bankruptcy?		[ ] Yes	[ ] No
If YES, then date of discharge:			

The undersigned attests that information above is true and complete by signing below. I confirm/we confirm that Affiliated Financial Services Inc. and its affiliates and (or) third party providers and (or) any financial institution chosen (collectively referred to as "AFS") can collect, use and rely on such commercial and/or personal information to confirm my identity, evaluate my credit worthiness and the risks in relation to the financing being requested and to comply with its legal and regulatory obligations. The undersigned allow AFS to get from any credit agency or lending company commercial information and/or personal information which could be required with respect to this credit application, including a credit bureau. I/we confirm also that AFS may disclose commercial and/or personal information related to the undersigned to any credit agency or lending company with which it maintains financial relationship. The undersigned recognises that AFS will keep a file containing some or all of my personal information, whether or not the requested credit is granted. The undersigned understands that he has a general right to access and rectify the personal information in this file by making a written request to AFS.

Signature	Date
Signature2	Date