ENTOURAGE CAPITAL GROUP

EQUIPMENT FINANCING ♦ ASSET BASED LENDING

CREDIT APPLICATION

BUSINESS BACKGROUND INFORMATION

Legal Name of Company:		Address:	
How long have you been in business?	Number of Employees #Full-time: #Part-time:	☐ Union ☐ Non-Union	List major equipment used by business:
Shareholder/Owner Name:		Title/Position:	% Owner:
Bank Name:		Line of Credit Limit:	Balance Outstanding:
Operating Facility / Yard Address:	If leased, expiry date: Landlord Name:		If owned, mortgage owing: $ Lender Name:

Customer Name: Dealing Since: % of Annual Sales:

1.

2.

3.

APPLICANT INFORMATION

Applicant Name (First, Initial, Last):		Birth Date (MM/DD/YYYY):	Social Insurance Number:	# of Dependents:
Home Phone:	Cell Phone:	Fax:	Email:	
Current Street Address:		City:	Province:	Postal Code: / For how long?
☐ Rent ☐ Own ☐ Buying ☐ With Relative		Monthly Mortgage or Rent Payment: $		
Previous Street Address (If less than 2 years at current address):		City:	Province:	Postal Code: / For how long?
Name of Nearest Relative not Living with Applicant:		Relationship:	Phone Number:	

PERSONAL NET WORTH STATEMENT

ASSETS	Cash Value	LIABILITIES	Balance Owing
Personal Residence	$	Mortgage (Who with?):	$
Cash in Bank	$	Line of Credit (Who with?):	$
Investments	$	Credit Cards Issuer 1: Issuer 2:	 $ $
Personal Vehicles (Year, Make, Model):	$	Car Loan or Lease (Who with?):	$
Other Assets (list)	$	Other Debts (list)	$
TOTAL ASSETS	$	TOTAL LIABILITIES	$

EQUIPMENT / CREDIT INFORMATION

Equipment is: ☐ New ☐ Used	Equipment to be financed: ☐ Replacement ☐ Additional	Equipment purchased via: ☐ Private Sale ☐ Dealer	Dealer Name:
Equipment Cost ($):	Less –Trade/Down Payment ($):	Total to be financed ($):	Term Requested:

Additional Information: ☐ Insurance Agent Contact: ☐ Accountant Contact: ☐

You confirm 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 referred to as "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. We will keep a file containing some or all of your personal information at our office at 66 Wakefield Blvd, St.Albert, AB T8N 3E7. You have a general right to access your personal information and rectify any errors in this file by making a written request to the above address, Attention: Privacy Officer.

Date Applicant's Signature