

To:  Ford Credit Canada Company / Ford Credit Canada Leasing\*  Canadian Road Leasing Company\*\*

**BUSINESS CREDIT APPLICATION**

Dealership Name: \_\_\_\_\_  RETAIL  LEASE  OTHER

**FOR INCORPORATED BUSINESSES ONLY (MUST HAVE CERTIFICATE OF INCORPORATION)**  
**[Individuals, Personal Guarantors of the Business, Proprietorships and Partnerships must complete Application Statement, Form 27141]**

<b>Incorporated Businesses must submit two year-end financial statements and most current balance sheet and profit / loss on business or current tax return.</b> <input type="checkbox"/> Corporation <input type="checkbox"/> Non-profit Organization		<b>Type of Financial Statement:</b> <input type="checkbox"/> Audited <input type="checkbox"/> Unaudited <input type="checkbox"/> Review Engagement Fiscal Year-End: _____	Accountant Name Area Code and Phone Number GST / HST Registration Number
Legal Name			Other Name(s) under which applicant's credit / trade references or history can be found
Present Address		City	Province Postal Code
Area Code and Phone Number	Cell Number	Fax Number	E-mail Address
Type of Business (Be specific)			
Years in Business	Number of Employees	Prov. of Incorporation	Incorporation Date (mm/dd/yyyy)
			Annual Revenues \$
			Total Assets \$
			Total Liabilities \$

**OWNERSHIP (Use additional sheet if necessary)**

Name of Owner	% of Ownership	Title	<input type="checkbox"/> Active in business <input type="checkbox"/> Inactive in business
Street Address	City	Province Postal Code	
Name of Owner	% of Ownership	Title	<input type="checkbox"/> Active in business <input type="checkbox"/> Inactive in business
Street Address	City	Province Postal Code	
Name of Owner	% of Ownership	Title	<input type="checkbox"/> Active in business <input type="checkbox"/> Inactive in business
Street Address	City	Province Postal Code	

**VEHICLE INFORMATION**

Intended Use of Vehicle(s)			
Number of vehicles in Fleet	Type of vehicle(s)	Annual average Km per vehicle	Ford Fleet Code

**BANK / CREDIT UNION INFORMATION**

Name:	Address:	Total Obligation(s)
Contact:	Area Code and Phone No.:	Account No.:
		\$ _____
Name:	Address:	Total Obligation(s)
Contact:	Area Code and Phone No.:	Account No.:
		\$ _____

**FINANCING SOURCES (List Two Bank and Vehicle / Equipment Financing / Leasing Sources)**

Name:	Address:	Total Obligation(s)
Contact:	Area Code and Phone No.:	Account No.:
		\$ _____
Name:	Address:	Total Obligation(s)
Contact:	Area Code and Phone No.:	Account No.:
		\$ _____

**TRADE REFERENCES (Provide Three Major Trade References with which your business has been transacting over the past 5 years)**

Name:	Address:	
Contact:	Area Code and Phone No.:	Type of transactions:
Name:	Address:	
Contact:	Area Code and Phone No.:	Type of transactions:
Name:	Address:	
Contact:	Area Code and Phone No.:	Type of transactions:

For the purpose of securing credit from you, I make the above representations. I am duly authorized to sign on behalf of the Corporation and certify that the above information is true and correct. I consent to a credit investigation and to the exchange of credit information.

Authorized Signature: **X** \_\_\_\_\_ Title: \_\_\_\_\_ Date (mm/dd/yyyy): \_\_\_\_\_

\* a division of Canadian Road Leasing Company  
 \*\* a limited partnership between Canadian Road management Company and Canadian Road Holdings Company  
 FC 27144 (01/2017) Previous editions may NOT be used.