



Credit Application for Trucking Industry – Owner Operator

Please return by fax to:
Attention:

Applicant

Full Legal Name		Operating As	
Trucking Since? (Month / Year)		Is this truck a Replacement Truck? <input type="checkbox"/> Additional Truck <input type="checkbox"/> My First Truck <input type="checkbox"/>	
Address Including Postal Code			
Phone ()	Fax ()	Cell ()	E-mail
Date of Birth (mmm/dd/yyyy)		SIN #	Have you ever been bankrupt? Yes <input type="checkbox"/> No <input type="checkbox"/>
Who do you Haul for?		How Long?	Average Monthly Income \$
Who Pays for Insurance? Applicant <input type="checkbox"/> Transport Company <input type="checkbox"/>		Who Pays for Fuel? Applicant <input type="checkbox"/> Transport Company <input type="checkbox"/>	Average Monthly Income \$
What do you Haul?		Where to/from?	Estimated Monthly KMs
Reason for Equipment Acquisition		Class of Drivers License?	
Who will be driving this vehicle?		If not you, their relationship to you?	What Class of License do they carry?

Balance Sheet

Bank Account Balances	Balances Owing on Bank Loans
Stocks/Bonds	Credit Cards
Principal Residence - Real Estate Owned	Mortgages on Principal Residence
Investment Property - Real Estate Owned	Mortgages on Investment Property
RRSP's	Income Taxes
Trade Accounts Receivable	Other:
Life Insurance Cash Value	Other:
Automotive Assets	Other:
Other	Total Liabilities
Total Assets	Personal Net Worth

Trade/Credit References

Fuel Supplier	Contact	Phone ()
Tire Supplier	Contact	Phone ()
Parts & Service Supplier	Contact	Phone ()

Equipment to be Leased (Please attach a Vehicle Specification Sheet with your application)

Description Including Year, Make Model etc.		Downpayment/Trade? \$
Cost \$	Term	Vendor
Representative	Phone ()	Fax ()
Address Including Postal Code		Website/E-mail

The undersigned certifies the above information to be true and correct. By signing below, I consent and authorize the following entities: Lease Link Canada Corp, Varion Capital Corp., Lease Link Capital Corp., (hereinafter, collectively known as Lease Link) and its representatives, at any time to obtain on an on-going basis, verify, use, communicate with and disclose to third parties (including credit reporting agencies, credit exchanges, leasing brokers, and credit grantors, on an on-going basis) any of my credit, financial, and personal information that Lease Link deems necessary to complete, service or enforce any lease, ancillary deed or transaction, including but not limited to assignments and securitizations.

You authorize us to collect, hold, exchange and disclose your personal information as requested in order to administer your contract & determine your insurance eligibility as required or permitted by law. You also authorize us to use your personal information for internal statistical analysis purposes.

If you would like to review your own personal information, correct or revise existing information, have any questions, concerns or comments regarding it's application please fax 1-780-414-0615 (Attn: Privacy Office) or mail #205, 10471 – 178St. Edmonton, AB T5S 1R5 Attn: Privacy Office. (03122010)

Signature of Applicant:	Title:	Date:
X _____	_____	_____