



GL Vendor Rep: \_\_\_\_\_

**VENDOR PROFILE**

Legal Name: \_\_\_\_\_ Vendor #: \_\_\_\_\_  
 Operating As: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Address: \_\_\_\_\_ Email: \_\_\_\_\_  
 City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**COMPANY INFORMATION**

Years in Business Under Present Ownership: \_\_\_\_\_ # of Employees: \_\_\_\_\_  
 Type of Business/ Principle Products and Brand Sold (Please attach brochures): \_\_\_\_\_  
 Trading Area: \_\_\_\_\_ # of Sales Reps: \_\_\_\_\_  
 Leasing Companies Used: \_\_\_\_\_  
 Who Coordinates Leasing: \_\_\_\_\_  
 Average Size Sale: \_\_\_\_\_ Average Monthly Sales Volume: \_\_\_\_\_  
 Anticipated lease Volume: \_\_\_\_\_  
 How is service provided on products sold by your company? \_\_\_\_\_

**TRADE REFERENCES**

Manufacturer/ Supplier Trade Information:

|             |              |                |                              |                             |
|-------------|--------------|----------------|------------------------------|-----------------------------|
| Name: _____ | Phone: _____ | Contact: _____ | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Name: _____ | Phone: _____ | Contact: _____ | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Name: _____ | Phone: _____ | Contact: _____ | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

**BANK INFORMATION**

Bank: \_\_\_\_\_ Branch: \_\_\_\_\_  
 Account #: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Inventory Financing Co: YES  NO  Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**PRINCIPAL INFORMATION**

Principal's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ City: \_\_\_\_\_  
 Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Date of Birth (MM/DD/YY): \_\_\_\_\_

ACKNOWLEDGEMENT: By signing below the Applicant and/or User confirms that the Business, Principals, Co-Applicant have consented to:  
 -The collection, use and disclosure of Personal (or Business) Information for the purpose of credit adjudication by Guardian Leasing Corp. and/or its funders in order to provide the applicant with the service requested.  
 -GLC and/or its funders to obtain credit information including consumer/commercial reports from consumer/commercial reporting agencies, financial institutions and any other references, provided by the applicant in connection with this application. A facsimile or electronic signature shall be accepted as an original execution.  
 -Social Insurance Numbers being used as an aid to identify you with the consumer credit reporting agency and/or funders for credit history file matching purposes.  
 -GLC and/or its funders to disclose Personal (or Business) Information in connection with the proposed financing to GLC subsidiary companies, funders, credit reporting agencies or other parties that the applicant may have financial dealings as well as GLC using said information to promote our services to you.

**X** \_\_\_\_\_  
 Authorized Vendor Signature Title Date