



Guardian Leasing.ca

THE EQUIPMENT FINANCING PROFESSIONALS™

CREDIT APPLICATION

Phone: 905-858-8014 or 1-866-LEASE-58
Fax: 905-858-8044 or 1-866-LEASE-58
Questions: support@GuardianLeasing.ca

Business Information

SAVE TIME! Complete an application online at GuardianLeasing.ca

LEGAL BUSINESS NAME		BUSINESS TYPE (check one) Corp <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietor <input type="checkbox"/>	
ADDRESS	CITY, PROVINCE/STATE	POSTAL/ZIP	
CONTACT	TELEPHONE # ()	FAX # ()	WEBSITE
NATURE OF BUSINESS		# YEARS YOUR LEGAL BUSINESS NAME HAS BEEN REGISTERED	

Principal #1 (Owner)

PRINCIPAL (OWNER) LEGAL NAME		PERCENTAGE (%) OF BUSINESS OWNERSHIP %	
Home Address	City	Province/State	Postal/zip
Email Address	SOCIAL INSURANCE NUMBER/SSN		DATE OF BIRTH (MM/DD/YY)
DO YOU OWN A HOME OR RENT? (Circle) Own Rent		HOUSE VALUE \$	MORTGAGE BALANCE \$
NAMES OF INDIVIDUALS ON TITLE TO HOME (if applicable)		HOME TELEPHONE # ()	CELLULAR # ()

Principal #2 (Co-Owner or Co-Applicant)

PRINCIPAL (CO-OWNER or CO-APPLICANT)		PERCENTAGE (%) OF BUSINESS OWNERSHIP %	
Home Address	City	Province/State	Postal/zip
Email Address	SOCIAL INSURANCE NUMBER/SSN		DATE OF BIRTH (MM/DD/YY)
DO YOU OWN A HOME OR RENT? (Circle) Own Rent		HOUSE VALUE \$	MORTGAGE BALANCE \$
NAMES OF INDIVIDUALS ON TITLE TO HOME (if applicable)		HOME TELEPHONE # ()	CELLULAR # ()

Equipment Details

EQUIPMENT SUPPLIER (VENDOR) NAME	CONTACT PERSON	TELEPHONE # or EMAIL
EQUIPMENT DESCRIPTION (PLEASE SEND SUPPLIER QUOTE)	EQUIPMENT COST (before taxes) \$	LEASE TERM REQUESTED (Years) 1 2 3 4 5
ESTIMATED DELIVERY DATE? (MM/DD/YY)	PURCHASING ADDITIONAL EQUIPMENT? (Circle) YES NO	DO YOU NEED MORE FINANCING? (Circle) YES NO

NOTES:

ACKNOWLEDGEMENT: By signing below you consent to the collection, use and disclosure of Personal (or Business) Information for the purpose of credit adjudication by Guardian Leasing Corp. (GLC) and/or its affiliates (lessors, banks, credit unions) or referring sources in order to provide the Applicant/Co-Applicant with the lease or financing requested. Obtaining and sharing consumer/commercial reports from reporting agencies, financial institutions and any other references in connection with the application. A fax or electronic signature shall be accepted as an original execution. Social Insurance Numbers are used as an aid to identify you with the consumer credit reporting agency and/or funders, lenders or brokerages for credit history file matching purposes. GLC and/or its funders or affiliates may disclose or obtain Personal (or Business) Information in connection with the proposed financing to GLC subsidiary companies, funders, credit reporting agencies or other parties that the Applicant/Co-Applicant may have financial dealings as well as GLC using said information to promote our services to you.

X _____ Date _____ **X** _____ Date _____
 SIGNATURE PRINCIPAL #1 (Applicant) SIGNATURE PRINCIPAL #2 (Co-Applicant)

SAVE TIME! Complete our Credit Application online at www.GuardianLeasing.ca

This Credit Application can be faxed to 905-858-8044 or 1-866-LEASE-58 or scan/email to Credit@GuardianLeasing.ca

You may take a digital photo of this application & email it to us. PLEASE review the photo for clarity before sending.