

Condition of Product Financed:				
<input type="checkbox"/> New	Make	Model	Year	Selling Price of Product (excl. accessories and taxes)
<input type="checkbox"/> Used				1
Trade-In Details:		Make	Model	Year
Balance of Loan on Trade-In		Cash Down Amount		Selling Price of Product (accessories and taxes included)
3		4		Amount financed +2+4-3

TYPE OF FINANCING APPLICABLE: Fixed Rate Personal Loan on CSC Renewable Rate Personal Loan on CSC Other: _____

FINANCING	Amount Financed	IAP INSURANCE						TYPE OF PROMOTION APPLICABLE TO FINANCING
	IAP Premium	Life	Disability	Life Insurance term (in months)	Disability Insurance term (in months)	Residual value life insurance	None	
	EW Premium	Applicant						
	Other Co Premium	Co-applicant						
Total Loan Amount	Waiting period: _____ days						<input type="checkbox"/> Interest Paid by Dealer Until:	
Loan Interest Rate	<input type="checkbox"/> Elimination (the insurance does not cover the waiting period)						Month: _____	
Term of Loan	<input type="checkbox"/> Retroactive (the insurance does cover the waiting period)						Day: _____	
Loan Amortization Period	EXTENDED WARRANTY TERM (in months)		REFUSE TO ENROL				Year: _____	
			Applicant's Initials	Co-applicant's Initials		<input type="checkbox"/> Subsidized Rate to Client _____ %		
			Life Insurance			<input type="checkbox"/> Other Promotion _____		
			Extended warranty			<input type="checkbox"/> Manufacturer's Promotion _____		
						Specify: _____		

BORROWER'S PERSONAL INFORMATION

Last Name	First Name	Middle Name	Address	Number	Street/Apt.
City	Province	Postal Code	Home Telephone	Since (mm/yy)	
Date of Birth	SIN (Optional*)	Type and Credit Card Number	Other		
Month:	Day:	Year:			

RESIDENTIAL STATUS

<input type="checkbox"/> OWNER OCCUPANT	Monthly Rental Income	\$ _____	<input type="checkbox"/> TENANT	Monthly Rent	\$ _____
	Mortgage Balance	\$ _____	<input type="checkbox"/> OTHER	Monthly Rent	\$ _____
	Monthly Mortgage Payment and Taxes (P. I. T.)	\$ _____			
	Municipal Property Value	\$ _____			

PERSONAL INFORMATION **CO-BORROWER** **SPOUSE** **CORPORATION**

Last Name	First Name	Middle Name	Address	Number	Street/Apt.
City	Province	Postal Code	Home Telephone	Since (mm/yy)	
Date of Birth	SIN (Optional*)	Type and Credit Card Number	Other		
Month:	Day:	Year:			

RESIDENTIAL STATUS

<input type="checkbox"/> OWNER OCCUPANT	Monthly Rental Income	\$ _____	<input type="checkbox"/> TENANT	Monthly Rent	\$ _____
	Mortgage Balance	\$ _____	<input type="checkbox"/> OTHER	Monthly Rent	\$ _____
	Monthly Mortgage Payment and Taxes (P. I. T.)	\$ _____			
	Municipal Property Value	\$ _____			

BORROWER'S EMPLOYMENT INFORMATION

Current Employment Status:	Employer or Business Name	Telephone No.	Job Title	Since (mm/yy)
<input type="checkbox"/> Self Employed <input type="checkbox"/> Full-Time		()		
<input type="checkbox"/> Wage-Earning <input type="checkbox"/> Part-Time	Net Annual Income	Gross Annual Income	Other Annual Income	
<input type="checkbox"/> Retired <input type="checkbox"/> Seasonal	\$ _____	\$ _____	\$ _____	

EMPLOYMENT INFORMATION **CO-BORROWER** **SPOUSE** **CORPORATION**

Current Employment Status:	Employer or Business Name	Telephone No.	Job Title	Since (mm/yy)
<input type="checkbox"/> Self Employed <input type="checkbox"/> Full-Time		()		
<input type="checkbox"/> Wage-Earning <input type="checkbox"/> Part-Time	Net Annual Income	Gross Annual Income	Other Annual Income	
<input type="checkbox"/> Retired <input type="checkbox"/> Seasonal	\$ _____	\$ _____	\$ _____	

FINANCIAL INFORMATION

Total Assets	Total Debts	Payments (monthly)
\$ _____	\$ _____	\$ _____

I hereby authorize Laurentian Bank of Canada (the "Bank"):

- To obtain information on my solvency or financial situation from any persons authorized by law, any persons mentioned in the credit reports obtained and any other financial institutions until any outstanding amount is fully repaid.
- To use my social insurance number for identification purposes and for data consolidations, for the services rendered by the Bank and its affiliates.
- To share the information it holds on myself with any other persons authorized by law, any personal information agents, any financial institutions, any co-applicants or, with my consent, any other persons who so request it.
- To communicate to the merchant, through whom I am making this applications the results of any credit report and the information justifying its decision to grant or refuse the loan.

I represent and warrant that all personal information set out herein is true and complete.

Signature of Borrower

Signature of Spouse/Co-Borrower

* Clients who do not wish to provide their SIN, must provide a credit card number as well as the type of the card to validate their identity.

RESERVED FOR USE BY MERCHANT

We hereby certify that the aforementioned borrower(s) will be purchasing a product from us for the amount stated above, that the identity of the borrower(s) has been verified and that the client(s) has (have) read and signed this document in our presence.

Company Name

Representative

Fax No.