FINANCING APPLICATION

PARADE LEASING INC.

5760 Paré Street, Mount Royal, QC H4P 2M2

PERSONAL INFORMATION	APPLICANT (OR CO-APPLICANT	OR GUARANTOR	FOR A COM	IPANY)
FIRST NAME		SURNAME			DATE OF BIRTH (M-D-Y)
DRIVER'S LICENSE NO.	S.I.N. (OPTIONAL)		EMAIL		
HOME PHONE	MOBILE PHONE		REFERENCE, RELATIONSHIP, TELEPHONE #		
CURRENT ADDRESS	CITY		PROVINCE	POSTAL CODE	SINCE
HOME IS OWNED, OR	LIVE WITH FAMILY		RENTED		MONTHLY RENT
PREVIOUS ADDRESS (IF LESS THAN 2 Y	EARS) CITY		PROVINCE	POSTAL CODE	HOW LONG
EMPLOYMENT INFORMAT	ION				
EMPLOYER		POSITION			SINCE
EMPLOYER ADDRESS	CITY	PROVINCE	POSTAL CODE	BUSINESS PHONE	
GROSS MONTHLY INCOME	ADDITIONAL INCOME	AND SOURCE		1	
PREVIOUS EMPLOYER		POSITION			HOW LONG
PREVIOUS EMPLOYER'S ADDRESS	CITY	PROVINCE	POSTAL CODE	BUSINESS PHO	I NE
SELF EMPLOYED OR BUSI	NESS OWNER				
NATURE OF BUSINESS				SINCE	
COMPANY NAME				BUSINESS PHO	NE
COMPANY ADDRESS	CITY PROVINCE		POSTAL CODE	GROSS MONTHLY PERSONAL INCOME	
WEBSITE		BUSINESS EMAIL	BUSINESS EMAIL		
FINANCIAL INFORMATION					
VALUE OF PRINCIPAL RESIDENCE	MONTHLY PMT	MORTGAGE BALANCE	LIEN HOL)ER	
OTHER ASSETS	I	1	I	VALUE	
PREVIOUS BANKRUPTCY	NO YES		WHEN		
PREVIOUS VEHICLE					
DESCRIPTION	OWNE	LIEN HOLDER			
VEHICLE OR EQUIPMENT	TO BE LEASED			1	
			ΙΡΤΙΟΝ	-	

I hereby certify that all of the information I have provided is correct. I acknowledge that Parade Leasing will carry out a credit and employment verification. Parade Leasing may disclose my personal credit information to its financial institutions and credit reporting agencies.

Yes! I would like Parade Leasing to send me information on promotions, updates and newsletters. You can withdraw your consent at any time.

SIGNATURE

APPLICANT

DATE

Please complete and return via fax to (514) 341-9112 Questions? Call us at (514) 341-9111 or email info@parade-leasing.com .

Attn: