



**INDUSTRIAL
CREDIT
CORPORATION**

INDUSTRIAL CREDIT CORPORATION
2206 Douglas Rd, Burnaby, BC V5C 5A7
Ph: (604) 733-7800 Fax: (604) 733-5789

LEASE APPLICATION - COMMERCIAL

DATE:		CONTACT NAME:		PHONE:	
COMPANY LEGAL NAME:			DBA:		# OF EMPLOYEES
ADDRESS:				GST #:	
YEARS IN BUSINESS: <input type="text"/>		BUSINESS DESCRIPTION:		COMPANY ACCOUNTANT:	
DATE INCORPORATED: <input type="text"/>		CORPORATION: <input type="checkbox"/>	PROPRIETORSHIP: <input type="checkbox"/>	PARTNERSHIP: <input type="checkbox"/>	
BANK REFERENCE					
BANK NAME & BRANCH:			ACCOUNT MANAGER / PHONE #:		ACCOUNT NUMBER:
TRADE REFERENCES					
NAME / ADDRESS:		CONTACT:		PHONE #:	
		NATURE / AMOUNT OF TRADE:			
NAME / ADDRESS:		CONTACT:		PHONE #:	
		NATURE / AMOUNT OF TRADE:			
NAME / ADDRESS:		CONTACT:		PHONE #:	
		NATURE / AMOUNT OF TRADE:			
PERSONAL INFORMATION OF PRINCIPALS / MAJORITY SHAREHOLDERS					
NAME:		TITLE:	OWNERSHIP (%)	BIRTHDATE:	
ADDRESS:			PHONE #:	OWN HOME: _____ RENT: _____	
NAME:		TITLE:	OWNERSHIP (%)	BIRTHDATE:	
ADDRESS:			PHONE #:	OWN HOME: _____ RENT: _____	
NAME:		TITLE:	OWNERSHIP (%)	BIRTHDATE:	
ADDRESS:			PHONE #:	OWN HOME: _____ RENT: _____	
VENDOR / EQUIPMENT INFORMATION (If space is insufficient attach list)					
VENDOR: (Incl. Address & Phone #)			SALESPERSON:		PHONE #:
EQUIPMENT DESCRIPTION:				NEW: <input type="checkbox"/> USED: <input type="checkbox"/>	
INSURANCE COMPANY/AGENT			TOTAL COST / TERM:		ESTIMATED DELIVERY DATE:

The undersigned certifies the above information to be true and correct.

Authorized Signature _____ Title _____ Date _____