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Personal Statement of Affairs

| Name | | Home Address | | Home Phone No. | Bus. Phone No. | | |
|---------------------------------------|---|---------------------------------|---------------------|---|----------------------------------|-----------------------|----------------|
| Occupation | | Social Insurance No. | Age | Name of Spouse | | | |
| | | | | Residence <input type="checkbox"/> Own <input type="checkbox"/> Rent | | | |
| Name of Business | | Years in Business | | Address of Business | | | |
| Name of Personal Bank | | Bank Contact Name | | Bank Phone No. | Ownership of business % | | |
| Assets | | Amount / Value | | Liabilities | | Monthly Payment | Balance Owning |
| Cash | 1. (name account): | | | Mortgages | 1. Primary Residence | | |
| | 2. (name account): | | | | 2. Secondary Explain: _____ | | |
| Stocks | Listed (on a public exchange) | | | | 3. Secondary Explain: _____ | | |
| | Unlisted (not on an exchange) | | | Credit | 1. Credit Card: _____ | | |
| Bonds | (GIC's or other) | | | | 2. Credit Card: _____ | | |
| | Accounts and Notes Receivable (Collectible) | Regular (any normal receivable) | | | | 3. Credit Card: _____ | |
| Relatives and Friends | | | | | 4. Line(s) of Credit: _____ | | |
| Other, Explain: | | | | Taxes | Income Taxes Unpaid | | |
| Real Estate | Primary Residence | | | | Real Estate Taxes Unpaid | | |
| | Business | | | Other Liabilities | List Any Other Creditors (Debts) | | |
| | Cottage | | | | 1. _____ | | |
| Other, Explain: | | | 2. _____ | | | | |
| Life Insurance | Cash Surrender Value | | | 3. _____ | | | |
| Other Personal Property | Automobile | | | Total Liabilities | | | |
| | Other, Explain: | | | | | | |
| | Other, Explain: | | | Net Worth (Total Assets - Total Liabilities) | | | |
| Total Assets | | | | | | | |
| Annual Income | | | | Annual Expenditures | | | |
| Salary, Wages, Commissions | | | | Property Taxes and Assessments | | | |
| Dividends and Interest | | | | Income Taxes | | | |
| Rentals (Gross) | | | | Real Estate Loan Payments or Rent | | | |
| Business or Professional Income (Net) | | | | Payments on Contracts and Other Notes | | | |
| Other Income, Describe: | | | | Insurance Premiums | | | |
| | | | | Estimated Living Expenses | | | |
| Prior 3 Years Income | | | | Other Explain: | | | |
| Year _____ | Year _____ | Year _____ | TOTAL INCOME | TOTAL EXPENDITURES | | | |
| \$ _____ | \$ _____ | \$ _____ | | | | | |

Are you a guarantor, co-signor or endorser on any person or company's debt? Yes No If Yes, Give Details _____
(use additional sheet if necessary)

Do you have any other business connection(s)? _____ Give Details _____

Are there any suits or judgments against you? _____ Any Pending? _____

Have you ever gone through bankruptcy? _____ Give Details _____

Have you previously borrowed from other financial institutions? _____ Which ones? _____

Do you have any Liabilities under leases? _____

Are any of your assets pledged or in any other manner unavailable for payment of your debts? _____ if so, give details _____

The foregoing information is submitted for the purpose of establishing credit and is a true, full and correct statement of my financial condition as of the date stated herein. **I hereby authorize Faithshire Leasing Corporation** (herein the "Company"), its subsidiaries, affiliates or assigns, to obtain any background information it deems necessary concerning this application, including but not confined to, reports from credit bureaus, retail credit companies, or any other source of credit investigation. I agree to notify you immediately of any material change of condition occurs while indebted to you. In the event that such notification is not given, or if other acts occur that, in the Company's opinion, either do or could adversely affect the Company's interest, then any and all outstanding obligations may, at the Company's election, become due and payable without demand or notice. **I hereby authorize** any bank, insurance company or other lender or financial institution agency or source, to disclose any information they may have pertinent to this application and for so doing this shall be their good and sufficient authority. I understand that the Company may keep some or all of my personal information on file and that I have the general right to request changes to correct same. Any request will be made in writing under signature.

Date Signed _____ day of _____ 20 _____

Witnessed Sign Here _____

Print Name _____

Sign Here _____

Print Name _____