



## CORPORATE CREDIT APPLICATION

**EDMONTON KENWORTH LTD. & KENWORTH LLOYDMINSTER**

**Phone: (780) 612 - 3723 Fax: (780) 612 – 3678 E-mail: finance@edmkw.com**

DATE	SALES REPRESENTATIVE:
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### CORPORATE INFORMATION

LEGAL BUSINESS NAME		TRADE NAME (IF DIFFERENT FROM LEGAL NAME)	
ADDRESS (STREET, CITY, PROVINCE, POSTAL CODE)		HOW LONG AT THIS ADDRESS? _____ YEARS / MONTHS	
		<input type="checkbox"/> OWN <input type="checkbox"/> RENT/LEASE	
HOME PHONE	BUSINESS PHONE	CELL PHONE	FAX
E-MAIL		<input type="checkbox"/> INCORPORATED <input type="checkbox"/> PROPRIETORSHIP	
DATE OF INCORPORATION:		NUMBER OF YEARS IN BUSINESS:	

### PERSONAL INFORMATION

SHAREHOLDER / OWNERS NAME					
PRIMARY (First / Middle / Last Name)	TITLE	% OWNER	DATE OF BIRTH (MM/DD/YY)	S.I.N.	*RESIDENTIAL ADDRESS (ST., CITY, PROV., PC)
OTHER					
OTHER					
*IF DIFFERENT FROM ABOVE					

### BANK INFORMATION

NAME	ADDRESS	CONTACT	PHONE	NATURE OF DEALINGS
NAME	ADDRESS	CONTACT	PHONE	NATURE OF DEALINGS
NAME	ADDRESS	CONTACT	PHONE	NATURE OF DEALINGS

### EQUIPMENT FINANCE EXPERIENCE

FINANCIAL INSTITUTION NAME	PHONE	DATE OPEN	COLLATERAL (year / make / model)

### FLEET INFORMATION

BUSINESS DESCRIPTION (i.e. freight, oilfield, forestry, construction, etc):		MATERIAL HAULED:	
NUMBER OF <u>TRACTORS</u> OWNED:		NUMBER OF <u>TRAILERS</u> OWNED:	
NUMBER OF TRACTORS LEASED:		NUMBER OF TRAILERS LEASED:	
# OF LEASE OPERATORS W/ TRACTORS:		# OF LEASE OPERATORS W/ TRAILERS:	
TOTAL TRACTORS:		TOTAL TRAILERS:	



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EQUIPMENT PURCHASED IS A

☐

REPLACEMENT

☐

ADDITIONAL

NUMBER OF ADDITIONAL PIECES OF EQUIPMENT (Construction equipment, forestry, etc.):

HOW LONG HAVE YOU **OPERATED** TRUCKS?

HOW LONG HAVE YOU **OWNED** TRUCKS?

### INCOME SOURCES

PLEASE PROVIDE DETAIL ON MAJOR CUSTOMERS BELOW

CUSTOMER NAME	CONTACT	LOCATION	PHONE NUMBER	MATERIAL HAULED	HOW LONG?
HAVE YOU FILED BANKRUPTCY (LAST 6 YEARS)?	ANY PREVIOUS REPOSSESSIONS?	ARE YOU A DEFENDANT IN ANY LEGAL ACTION?	HAVE YOU EVER FINANCED THROUGH EDMONTON KENWORTH?		
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO		

**Date of most recent fiscal year-end:** \_\_\_\_\_

If most recent year-end statements are not completed, please provide previous year-end statements and interim statements as of year-end date.

**Statements attached?** Yes ☐ No ☐ **Date of Statements attached:** \_\_\_\_\_

Please provide interim financial statements if year-end statements are more than 6 months old (if available).

The undersigned hereby warrants and confirms that the above information is true and correct and understands clearly that it is being used to determine my credit responsibility. You are authorized to obtain any information you may require for this application from any source/s at your discretion and each such source is hereby authorized to provide you with such information. You are furthermore authorized to disclose, in response to direct inquiries from any lender or any Credit Bureau, such information on my account as you consider appropriate, and I agree to indemnify you against and save you harmless from any and all claims in damages or otherwise arising from such disclosure on your part. You are also authorized to retain the application whether approved or not.

\_\_\_\_\_  
Signing Authority

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title