

## **CONSUMER APPLICATION - SELF-EMPLOYED**

Complete in block letters

Signature

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Source:

PERSONA	L INFORMAT	ON			EMPLOYE	R				
Name:					Name:					
Address:					Contact:					
City/Prov.:					Title:				Since:	
Postal Code	<b>e</b> :				Tel. (office)	•				
Tel. (home):	:		Tel. (office):		Status:	Permanent		Temporary	Seasonal	Contract
S.I.N.:					If self-emple	oyed, indicate	type of bu	ısiness:		
Date of Birth	n:									
Marital Statu	us:				Tel. (office)	• •			Since:	
SPOUSAL INFORMATION					SPOUSAL EMPLOYER					
Name:					Name:					
Title:					Contact:					
Status: 📑	Permanent 🔲	emporary	Seasonal	Contract	Tel. (office)	:			Since:	
FINANCIA	L INFORMAT	ION (attach	a sample cheque)							
Name:					Name:					
Address:					Address:					
Account No.	.:				Account No	).:				
REVENUE					SPOUSAL REVENUE					
Monthly Gross Income:					Monthly Gross Income:					
Other Revenue:					Other revenue:					
DWELLING	G									
Tenant?	∐Yes  □No	)	Monthly Rent:		Owner?	□Yes	□No		Municipal Taxes:	
ASSETS										
Building Des	scription:								Value (\$):	
Car Descript	tion:								Value (\$):	
Furnitures:									Value (\$):	
Other:									Value (\$):	
Other:									Value (\$):	
Savings/Investments:									Value (\$):	
LIABILITII	ES								TOTAL ASSETS:	
CREDITORS								Original Amount	Monthly Pymt.	Balance
Hypothecary										
Car Creditor	r:									
Other Credit	tors (credit cards	, etc.):								
								TC	OTAL LIABILITIES :	
SUPPLIER	2									
Name:	J and J Traile	rs			Contact:	Al Abdelr	nalek		Prog. No.:	
Address:	345 Finchder	-	CARBOROUGH (						(416) 298-4482	
		****	*** Please a	ttach your q	uotation	to the cr	edit ap	plication *****	***	
PAYMENT	TERMS									
Cost:			Exchange:		Depos	sit:			Term (months):	
warranty obt	taining from any	Credit Repo		redit Garantor wit	th whom the	undersigned I		By signing below, I/ial relations, any info		

Date