

LESSEE STATEMENT BUSINESS

PRINT FULL BUSINESS NAME:		TYPE OF BUSINESS:	YEARS STARTED	BUSINESS PHONE #
BUSINESS ADDRESS:	NUMBER AND STREET	CITY	PROVINCE	POSTAL CODE

RENT <input type="checkbox"/> OR OWN <input type="checkbox"/>	NAME & ADDRESS OF MORTGAGE HOLDER OR LANDLORD	MONTHLY PAYMENT: IF RENT: _____ MTG. AMOUNT: _____
MARKET VALUE IF OWNED:		

BUSINESS CHEQUING ACCOUNT:	BANK NAME	ADDRESS	CITY	PROVINCE	POSTAL CODE
CHEQUING ACCOUNT NUMBER:		CONTACT PERSON:			

PREVIOUS BANK IF ABOVE IS LESS THAN 2 YEARS:	BANK NAME	ADDRESS	CITY	PROVINCE	POSTAL CODE
CHEQUING ACCOUNT NUMBER:		CONTACT PERSON:			

COMPANY FROM WHICH LAST VEHICLE LEASED <input type="checkbox"/> OR FINANCED <input type="checkbox"/>	NAME / ADDRESS	CITY	PROVINCE	POSTAL CODE	MONTHLY CHARGE \$ _____ <input type="checkbox"/> ACTIVE ACCT. <input type="checkbox"/> CLOSED ACCT.
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MAJOR CREDIT REFERENCES:								
1:	NAME	/	ADDRESS	CITY	PROVINCE	POSTAL CODE	TEL. NO.	YRS
EXP.								
2:	NAME	/	ADDRESS	CITY	PROVINCE	POSTAL CODE	TEL. NO.	YRS
EXP.								

PRINCIPAL OPERATOR - NAME ASSOCIATED	HOME ADDRESS	POSITION	YEARS	
DRIVERS LICENSE NO.	ADDRESS WHERE VEHICLE WILL BE GARAGED:			
	ADDRESS	CITY	PROVINCE	POSTAL CODE

TYPE OF ORGANIZATION	() PROPRIETORSHIP
	() PARTNERSHIP
	() CORPORATION

THE UNDERSIGNED CERTIFIES THAT ALL THE INFORMATION IS TRUE AND CORRECT. BY SIGNING BELOW, I/WE CONSENT TO THE OBTAINING, FROM ANY CREDIT REPORTING AGENCY OR CREDIT GRANTOR, SUCH INFORMATION AS ENSIGN PACIFIC LEASE LTD. MAY REQUIRE AT ANY TIME IN CONNECTION WITH THE CREDIT HEREBY APPLIED FOR, AND CONSENT TO THE DISCLOSURE AT ANY TIME OF ANY INFORMATION CONCERNING THE UNDERSIGNED TO ANY CREDIT REPORTING AGENCY OR TO ANY CREDIT GRANTOR WITH WHOM THE UNDERSIGNED MAY HAVE FINANCIAL DEALINGS. WE MAY DO THIS OURSELVES OR THROUGH AN AGENT.

AUTHORIZED SIGNATURE: _____ **DATED:** _____, 19_____

TITLE: _____

YEAR	MAKE	MODEL	LEASE TERM	PAYMENTS	SECURITY DEPOSIT	DOWN PAYMENT
COST/VALUE OF VEHICLE						

SALES PERSON: _____

FOR OFFICE USE:
