



TWO MINUTE CREDIT APPLICATION

PHONE : (905) 858-8014 or 1-888-32-FIRST

FAX: (905) 858-8044 or 1-877-32-FIRST

EMAIL: Credit@1stMutual.ca

WEB: www.1stMutual.ca

A. Business Information (if not a business please go to Section B)

Manager: MIKE BASA ext. 225

LEGAL BUSINESS NAME (Please indicate whether Limited, Incorporated, Sole Proprietor or Partnership)

ADDRESS	CITY, PROVINCE	POSTAL
CONTACT	TELEPHONE #	FAX #
		WEBSITE ADDRESS
NATURE OF BUSINESS	# YEARS YOUR LEGAL BUSINESS NAME HAS BEEN REGISTERED	

B. Principal/Consumer Information

#1 BUSINESS PRINCIPAL (or CONSUMERS) FULL LEGAL NAME #2 BUSINESS PARTNER (or if CONSUMER, SPOUSAL INFORMATION)

HOME ADDRESS	City, Postal	HOME ADDRESS	City, Postal
SOCIAL INS. #	DATE OF BIRTH	SOCIAL INS. #	DATE OF BIRTH
HOME TELEPHONE	% OF OWNERSHIP (if applicable)	HOME TELEPHONE	% OF OWNERSHIP (if applicable)
CELLULAR #	EMAIL ADDRESS	CELLULAR #	EMAIL ADDRESS
HOUSE VALUE	MORTGAGE BALANCE	HOUSE VALUE	MORTGAGE BALANCE
EMPLOYER NAME	ANNUAL INCOME (gross)	EMPLOYER NAME	ANNUAL INCOME (gross)

C. Banking Details

NAME OF BANK	ACCOUNT NUMBER	TELEPHONE #	ACCOUNT MANAGER (if applicable)
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D. Financing Details

EQUIPMENT SUPPLIER NAME	CONTACT OR SALESPERSON	TELEPHONE #
Robotnik.com Inc.		902-852-2784
EQUIPMENT (attach Robotnik Quotation if possible)	EQUIPMENT/SOFTWARE COST (before tax)	TERM REQUESTED
	\$	

FUTURE FINANCING REQUIRED (kindly state specific needs: Car Lease/Truck Lease/Additional Equipment/Commercial Mortgage and \$ Amount Required)

ACKNOWLEDGEMENT: By signing below the Applicant and/or User confirms that the Business, Principals, Co-Applicant, Co-Lessee or Guarantor have consented to:

- The collection, use and disclosure of Personal (or Business) Information for the purpose of credit adjudication by FML (First Mutual Leasing) and/or its funders (lessors, banks, credit unions & insurance companies) in order to provide the applicant with the lease, loan, mortgage or financing requested.
- FML and/or its funders to obtain credit information including consumer/commercial reports from consumer/commercial reporting agencies, financial institutions and any other references, provided by the applicant in connection with this application. A facsimile or electronic signature shall be accepted as an original execution.
- Social Insurance Numbers being used as an aid to identify you with the consumer credit reporting agency and/or funders for credit history file matching purposes.
- FML and/or its funders to disclose Personal (or Business) Information in connection with the proposed financing to FML subsidiary companies, funders, credit reporting agencies or other parties that the applicant may have financial dealings as well as FML using said information to promote our services to you.

X _____ Date _____ X _____ Date _____
 SIGNATURE OF APPLICANT SIGNATURE OF PARTNER or CO-APPLICANT

Online Application, Documents & Address Information at www.1stMutual.ca