



TransCan Leasing Corp. Credit Application
 888 Terminal Avenue
 Vancouver, BC, V6A 2M5
 Office: 604-684-2430 Toll Free: 844-684-2430
 Fax: 604-608-4849
info@TransCanLeasing.ca

PRIMARY BORROWER:

Full Legal Name _____
 Social Insurance Number _____
 Driver License Number _____
 Driver License Expiration Date _____
 Date of Birth _____
 Gender _____ Marital Status _____

Home Phone _____
 Cell Phone _____
 Work Phone / Extension _____
 Personal Email _____
 Number of Dependants _____

CURRENT ADDRESS: How Long ___ years ___ months

Street _____
 City / Province _____
 Postal Code _____ Rent Own
 Landlord (name & phone) _____

PREVIOUS ADDRESS (if less than 3 years at current):

Street _____
 City / Province _____
 Postal Code _____ Rent Own
 Landlord (name & phone) _____

1st REFERENCE (not residing with you):

Name _____
 Phone _____

2nd REFERENCE (not residing with you):

Name _____
 Phone _____

CURRENT EMPLOYER:

Company _____
 Address _____
 City / Province _____
 Postal Code _____ How Long _____
 Gross Monthly Income _____

Position _____
 Work Phone _____
 Work Email _____
 Structure of Income
 Salary Commission
 Hourly Contract
 Self-Employed Other

PREVIOUS EMPLOYER: (if less than 3 years at current):

Company _____
 Address _____
 City / Province _____
 Postal Code _____ How Long _____
 Gross Monthly Income _____

Position _____
 Work Phone _____
 Work Email _____
 Structure of Income
 Salary Commission
 Hourly Contract
 Self-Employed Other

OTHER VERIFIABLE INCOME:

Company _____
 Gross Monthly Income _____

Length of Employment _____

I warrant that the information contained in this Application, to the best of my knowledge is a true and accurate representation of my personal information.

INITIALS (1 box each)



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CO-BORROWER:

Full Legal Name _____
 Social Insurance Number _____
 Driver License Number _____
 Driver License Expiration Date _____
 Date of Birth _____
 Gender _____ Marital Status _____

Home Phone _____
 Cell Phone _____
 Work Phone / Extension _____
 Personal Email _____
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 Gross Monthly Income _____

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 PH: 604.684.2430 TollFree: 844.684.2430 FaxL604.608.4849
 into@transcanleasing.ca / www.TransCanLeasing.ca

Auto Financing Application – Income & Expenses

	Source of Monthly Income	Gross Monthly Income	Net Inc.
Borrower			
Co Borrower			
Number of Dependents		Total	
Landlord Phone Number			
Work or Other Email			
Housing		Medical Expenses	
Rent / First Mortgage		Medical Insurance	
Second Mortgage		Prescriptions	
Property Taxes		Dental	
Home Insurance		Optical	
Strata / Condo Fees		Life Insurance	
Hydro		Total	
Gas			
Telephone		Other Expenses	
Cable		Tobacco Products	
Total		Alcoholic Beverages	
Living Expenses		Entertainment	
Groceries		Gifts	
Restaurants		Miscellaneous Expenses	
Lunch at Work		Total	
Clothing			
Haircuts		Debt Payments	
Total		Proposal Payments	
Transportation		Spousal Debt	
Public Transportation		Total	
Auto Payment/Lease			
Auto Fuel			
Auto Repairs &		Total Monthly Expenses	
Auto Insurance		Total Monthly Income	
Total		Disposable Cash Flow	
Family Expenses			
Child Care			
Child Support			
Alimony			
Total			

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VEHICLE NEEDS / YOUR FINANCIAL SITUATION

Do you currently have a vehicle:

YES ___ NO ___ FINANCED ___ (Y/N) PAYMENT \$ _____

MAKE/MODEL _____

What are your critical vehicle needs:

Please provide details of circumstances surrounding current financial situation:

If you are in consumer proposal or bankruptcy, please acknowledge your trustee may be contacted to be updated on the status of your current term: YES ___ NO ___ (NOTE: FAILURE TO SUBMIT APPROVAL WILL BE CONSIDERED REASON NOT TO APPROVE APPLICATION.)

The above information is submitted to enable TransCan Leasing Corp. to consider a vehicle lease, and is to the best of My/Our knowledge and belief a true statement of My/Our personal information. In submitting this information, I/We hereby consent to the disclosure of My/Our personal and credit information to any reporting agency, financial institution, legal firm, insurance company, mortgage insurance company as well as TransCan Leasing or any other company directly involved in the loan process.

I/We also consent to receive periodic loan account information. I/We understand that my lease payment history can/will be reported to the Credit Reporting Agencies before / during / after termination of lease. Your privacy is important. We are committed to respecting and protecting your privacy and security. We have implemented measures to protect the privacy and security of your personal information through strict policies and practices in compliance with applicable Federal and Provincial privacy legislation.

BORROWER'S NAME

BORROWER'S SIGNATURE

DATE

BORROWER'S NAME

BORROWER'S SIGNATURE

DATE