Close

2001 Sheppard Avenue East, Suite 600
Toronto, Ontario M2J 4Z8
Toll Free: 1-800-465-4591 or Local (GTA): (416) 753-4000
Toll Free Fax: 1-866-861-4100 or Local Fax: (416) 753-4100

COMMERCIAL LEASE APPLICATION

Contract No. _____

COMPANY INFORMATION			
Type of Business: ☐Association ☐Corporation ☐Crown Corporation ☐Education ☐Government ☐Individual ☐Limited Partner ☐Medical ☐Non-Profit ☐Partnership ☐Proprietorship			
Corporate Name:	Operating Name:		
Principal Owner(s) (first given name, middle name, surname):			
Number of years in business:	Number of employees:	Website Address:	
ADDRESS AND CONTACT INFORMATION			
Street Address (including suite # if applicable):	City:	Province:	Postal Code:
Country:	Length of time at current address:		
Telephone Number:	Fax Number:		
MAILING ADDRESS (Complete if different than above)			
Mailing Address (including suite # if applicable):	City:	Province:	Postal Code:
Country:	Length of time using this mailing address:		
FINANCIAL INFORMATION			
Bank Name:	Bank Contact Name (account manager):		
Bank Telephone Number:	Bank Fax Number:		
Financial Statements available year ending: _____ Month _____ Year			
DEALERSHIP INFORMATION			
Dealership Name:			
VEHICLE INFORMATION			
Year:	Make:	Model:	Current Odometer Reading: kms
AUTHORIZATION			
I confirm that I am an authorized signing officer of the aforementioned Company and have authority to bind the Corporation.			
Authorized Signing Officer Name: _____ First Given Name _____ Middle Name (if any) _____ Surname			
Authorized Signing Officer Signature:	Date:		