



COMPANY INFORMATION

Full Legal Business Name			Operating Name		
Street Address			Corporation?	Partnership?	Sole Proprietor?
City	Province	Postal Code	Year Established		Nature of Business
Phone	Fax		Email		

PRIMARY APPLICANT INFORMATION

SPOUSE INFORMATION

Full Legal Name		Spouse Name			
Date of Birth	SIN (Optional)		Spouse Date of Birth		Spouse SIN (Optional)
Employer	Monthly Income		Spouse Employer		Spouse Monthly Income
Street Address			City	Province	Postal Code
Home #	Cell #		Email		

PERSONAL NET WORTH – SPECIFY BELOW

VALUE

AMOUNT OWING

Primary Residence		
Other Real Estate		
Vehicles/Equipment		
Vehicles/Equipment		
Other Assets (Specify)		
Cash in Bank		
	Total Assets	Total Liabilities

EQUIPMENT

Description			Cost	
Description (Cont'd)			New?	Used?
Vendor	Vendor Phone	Vendor Email	Vendor Contact	

PERSONAL INFORMATION: You consent to our: (a) collection, use and disclosure to our affiliates, credit bureaus, reporting agencies, financial institutions and businesses with whom you have or had a financial relationship and other references provided in support of this agreement (and disclosure by these parties to us), of personal information provided herein and elsewhere and credit and financial information obtained from the above sources for the purposes of verifying and evaluating current and ongoing creditworthiness; (b) disclosure of credit and financial information connected with this Agreement to future creditors or lenders that request credit references; (c) use and disclosure to (and use by) our affiliates of the above information for the purposes of administering, servicing and collecting on this Agreement and your account; managing and administering our business; meeting legal, regulatory, security and processing requirements; and otherwise as permitted or required by law; (d) use and disclosure of personal information to parties connected with the contemplated or actual financing, insuring, sale, securitization, concurrent lease or rental agreement, assignment or other disposal of all or part of our business or assets (including this Agreement or part thereof and the property that is the subject matter thereof) for the purposes of determining whether to proceed with such transaction, fulfilling any reporting or audit requirements there under and the use and disclosure by such parties for substantially the same purposes as described herein. (e) use of your Social Insurance Number and other personal identifiers for matching of credit bureau/reporting agency information. Employees and agents that need to access your personal information to fulfil their job requirements will have access to your file. If you have any questions about the collection, use or disclosure of your personal information, or if you have questions about Arbutus Capital's privacy policies or practices, please contact our Privacy Officer at #1530-355 Burrard Street, Vancouver, BC V6C 2G8

Applicant Signature	Spouse Signature	Date
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BUSINESS PROFILE

Business Name		Business Start Date
Website Address		Nature of Business
Primary Contact		GST #
Contact Phone	Contact Email	# of Employees

NAMES OF BUSINESS OWNERS

% OWNED

ABOUT THE BUSINESS

What exactly does (or will) your company do?

Where will your sales come from? How will customers find you?

What additional information should we know about your business?

ABOUT THE OWNERS

What were the owners doing prior to the start of the business?

Will any of the owners be continuing with outside employment? If so, please provide details.

What additional information should we know about you?