

# Prescott Thackery Merchant Group Ltd.

Telephone: 416-345-0032

Fax: 416-340-0064

## APPLICATION

<b>GENERAL INFORMATION</b>			
Full Business Name (Applicant)  (As shown on the Articles of Incorporation, if incorporated)	<input type="checkbox"/> Federally Incorporated <input type="checkbox"/> Provincially Incorporated <input type="checkbox"/> Partnership/Sole Prop.	Date Incorporated:	Date Established:
Trade Name: (If any, please indicate place of registration)	Type of Business		
Business Address:		Telephone:	
City / Province	Postal Code	Fax:	
Email Address:		CCRA Business Number:	
<b>SUPPLIER CREDIT REFERENCES</b>			
Business Name:	Contact Name:	Telephone:	
Business Name:	Contact Name:	Telephone:	
Business Name:	Contact Name:	Telephone:	
Has the company or any of its officers / owners ever declared bankruptcy? <input type="checkbox"/> <input type="checkbox"/> If yes, please provide date of discharge: _____			
Has the company or any of its officer(s)/owner(s) ever been a party to any civil or criminal legal actions? <input type="checkbox"/> <input type="checkbox"/> If yes, please provide details: _____			
<b>SHAREHOLDERS, OFFICERS &amp; DIRECTORS</b>			
Name:			SIN
Title	% of Ownership		Date of Birth
Home Address	Own	Rent	Telephone
City / Province	Postal Code		Fax
Name:			SIN
Title	% of Ownership		Date of Birth
Home Address	Own	Rent	Telephone
City / Province	Postal Code		Fax
Name:			SIN
Title	% of Ownership		Date of Birth
Home Address	Own	Rent	Telephone
City / Province	Postal Code		Fax

# BANK AND SECURITY INFORMATION

Bank		Account No.
Address		
City / Province	Postal Code	Line of Credit
Telephone	Fax	Contact name
Check all items for which your bank has a security interest:		
<input type="checkbox"/> Accounts receivable	<input type="checkbox"/> Equipment	<input type="checkbox"/> Inventory <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other: _____

# OTHER SECURED CREDITORS

**If any other entity has a security interest in any of the assets of the business, please complete the following**

Name of creditor:	Telephone:	Fax number:
Name of creditor:	Telephone:	Fax number:

# REVENUE DATA

Present amount of A/R. \$ _____	Terms of sale _____	Average monthly sales \$ _____	Number of customers _____
Are receivables pledged as collateral Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, to whom are they pledged? _____	Have you factored before? Yes <input type="checkbox"/> No <input type="checkbox"/>	

TAXES AND DUES	ARREARS	TAXES AND DUES	ARREARS
<u>Income Taxes</u>		<u>Payroll Deductions</u>	
<input type="checkbox"/> Nil \$ _____	<input type="checkbox"/> Nil \$ _____	<input type="checkbox"/> Nil \$ _____	<input type="checkbox"/> Nil \$ _____
<u>GST</u>		<u>Workers Compensation</u>	
<input type="checkbox"/> Nil \$ _____	<input type="checkbox"/> Nil \$ _____	<input type="checkbox"/> Nil \$ _____	<input type="checkbox"/> Nil \$ _____
<u>PST</u>		<u>Other</u>	
<input type="checkbox"/> Nil \$ _____	<input type="checkbox"/> Nil \$ _____	<input type="checkbox"/> Nil \$ _____	<input type="checkbox"/> Nil \$ _____

# OTHER INFORMATION

Non-owner management contact	Title	Signing authority Yes <input type="checkbox"/> No <input type="checkbox"/>
Accountant	Firm	Telephone
Lawyer	Firm	Telephone

- In order for your application to be processed in a timely manner, please submit the following documents with this application:**
- |   |  |
|---|--|
| 1 - Articles of Incorporation and Trade Name registration form(if applicable) | 5 - Master Customer List   |
| 2 - Current Accounts Receivable/Payable Aging Report                          | 6 - One page summary of the company and its history                    |
| 3 - Photo copy of driver's license(s) for company's principal(s)              | 7 - Amount of funds required and an outline for their use              |
| 4 - Current year's Financial Statements                                       | 8 - Revenue Canada statement of account-current statement & deductions |

*I/We hereby authorize Prescott Thackery Merchant Group Ltd., its agents, representatives affiliated parties and lenders to verify and investigate my/our credit worthiness and financial responsibility, in any way they may choose. I/We grant Prescott Thackery Merchant Group Ltd. or its agents, affiliated parties and lenders the right to procure any and all credit reports pertaining to any party listed in this application, including, but not limited to, all principals of the applicant company. Your hereby irrevocably directed and authorized to deliver to, to disclose to and to discuss with Prescott Thackery Merchant Group Ltd., its agents, representatives, affiliated parties and lenders any and all matters relating to our past present and future dealings, including credit related matters. All officers/owners listed above must sign this document. A copy of our privacy policy is available on request.*

_____	_____	_____
Date	Name (please print)	Signature
_____	_____	_____
Date	Name (please print)	Signature
_____	_____	_____
Date	Name (please print)	Signature