

LOAN APPLICATION

(Complete the Application Form and Fax to 519-326-6567)

APPLICANT PERSONAL INFORMATION				
Mr. / Mrs. / Miss / Ms	First Name	Middle Name	Surname	
Date of Birth (dd/mm/yy)	SIN#	Home Phone # ()		
Home Address	City	Province	Postal Code	How Long Yrs. Mo.
Previous Address (if less than 2 years)	City	Province	Postal Code	How Long Yrs. Mo.
Marital Status Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Common Law <input type="checkbox"/>				
Residence Own <input type="checkbox"/> Rent <input type="checkbox"/> Living with Parents <input type="checkbox"/>	Value of Home	Remaining Mortgage	Monthly Payment (Tax Incl'd)	Banking Institution
APPLICANT EMPLOYMENT INFORMATION				
Current Employer	Position		Phone # ()	How Long Yrs. Mo.
Employer Address		City	Province	Postal Code
Self Employed Yes <input type="checkbox"/> No <input type="checkbox"/>	Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Contract <input type="checkbox"/> Seasonal <input type="checkbox"/> Retired <input type="checkbox"/>			Gross Annual Income
Previous Employer (if less than 2 years)	Position		Gross Annual Income	How Long Yrs. Mo.
OTHER INCOME				
Other Income Source		Monthly Amount \$		
CO-BORROWER PERSONAL INFORMATION (SPOUSE OF APPLICANT OR GUARANTOR)				
First Name	Middle Name	Surname		
Date of Birth (dd/mm/yy)	SIN#	Signing on this Loan? Yes <input type="checkbox"/> No <input type="checkbox"/>		
CO-BORROWER EMPLOYMENT INFORMATION				
Current Employer	Position		Phone # ()	How Long Yrs. Mo.
Employer Address		City	Province	Postal Code
Self Employed Yes <input type="checkbox"/> No <input type="checkbox"/>	Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Contract <input type="checkbox"/> Seasonal <input type="checkbox"/> Retired <input type="checkbox"/>			Gross Annual Income
Previous Employer (if less than 2 years)	Position		Gross Annual Income	How Long Yrs. Mo.

I/we agree that the information given on this application is complete and accurate. I/we authorize Sturgeon Woods RV to obtain, verify, give, share and exchange personal information about me/us, with any individuals, financial institutions, business corporations or other parties with whom I/we have or propose to have financial or personal dealings, or who hold information about such dealings, such as credit bureaus. My/our personal information will be used for the purpose of confirming my/our identity and the accuracy of the information I/we provide or Sturgeon Woods RV collects with this consent, assessing the history of my/our financial dealings to determine my/our eligibility for the products and services I/we have applied for, and as may be otherwise permitted or required by law. I/we also authorize any person that Sturgeon Woods RV contacts under this authorization to provide such information.

Applicant Signature
 Date (mm/dd/yy) _____

Co-Borrower Signature
 Date (mm/dd/yy) _____