

Dealer:		Vehicle:		Price: <small>(INCLUDING TAXES)</small>
Down-Payment:		Term Requested:		<b>Please attach Bill of Sale and D.L.</b>
First Name:		Middle Name:		Last Name:
Date of Birth: DD / MM / YYYY		Marital Status: <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> COMM. LAW <input type="checkbox"/> SEPARATE <input type="checkbox"/> DIVORCED		
SIN: I I		Home Address:		
City:		Province:	Postal Code:	Home Phone:
How Long At Address:		Previous Address: <small>(IF LESS THAN 3 YEARS)</small>		
Employer Name:		Position:		Status: <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> SEASONAL
Employer Address:			Employer Phone:	
How Long at Job:		Previous Employer and Address: <small>(IF LESS THAN 3 YEARS)</small>		
Gross Monthly Income:		Other Sources of Income:		Other Income Amount:
Residence: <input type="checkbox"/> OWN FREE & CLEAR <input type="checkbox"/> OWN WITH MORTGAGE <input type="checkbox"/> RENT <input type="checkbox"/> LIVE W/FAMILY				Monthly Payment: <small>(FOR RENT OR MORTGAGE)</small>
Property Value: <small>(IF OWNED)</small>				Mortgage Lender:
Landlord Name: <small>(IF RENT)</small>		Landlord Phone:		
First Name:		Middle Name:		Last Name: Relation:
Date of Birth: DD / MM / YYYY		Marital Status: <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> COMM. LAW <input type="checkbox"/> SEPARATE <input type="checkbox"/> DIVORCED		
SIN: I I		Home Address:		
City:		Province:	Postal Code:	Home Phone:
How Long At Address:		Previous Address: <small>(IF LESS THAN 3 YEARS)</small>		
Employer Name:		Position:		Status: <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> SEASONAL
Employer Address:			Employer Phone:	
How Long at Job:		Previous Employer and Address: <small>(IF LESS THAN 3 YEARS)</small>		
Gross Monthly Income:		Other Sources of Income:		Other Income Amount:
Residence: <input type="checkbox"/> OWN FREE & CLEAR <input type="checkbox"/> OWN WITH MORTGAGE <input type="checkbox"/> RENT <input type="checkbox"/> LIVE W/FAMILY				Monthly Payment: <small>(FOR RENT OR MORTGAGE)</small>
Property Value: <small>(IF OWNED)</small>		Outstanding Mortgage:		Mortgage Lender:
Landlord Name: <small>(IF RENT)</small>		Landlord Phone:		
<p><b>Consent to the Collection, Use and/or Disclosure of Your Information:</b></p> <p>You certify that all information provided by you in any credit application or other documentation given in connection with credit application are true, accurate and complete in all respects.</p> <p>You consent to the collection of information by Capital Trust Financial and/or its mandatory from your employer and other lender(s), financial institutions, personal information agents and any other individuals or organizations holding information on you such as Revenue departments and credit bureaus, the information necessary for analyzing this loan application and for following up on the credit if granted. You further consent to the disclosure by Capital Trust Financial.</p> <p>We may obtain Information about you from other parties including through a credit check, and verify Information with them. You authorize those parties to give us the Information. We may disclose Information to other lenders, credit bureaus, the supplier(s) of goods and/or services to you - this helps establish your credit history and support the credit process.</p> <p>You agree that, at the time you begin a relationship with us and during the course of our relationship, we may collect, use and disclose your Information as described in the Privacy Agreement which has or will be provided to you and is available on <a href="http://www.capitaltrustfinancial.com">www.capitaltrustfinancial.com</a>, including but not limited to, for the purposes of identifying you, providing ongoing service, protecting us both from fraud and error, and complying with regulatory requirements.</p>				
Applicant's Signature:		Co-Applicant's Signature:		Date: