JOCOVA FINANCIAL

FAX BACK TO 1-888-546-5152 / MIKE.SHAVER@JOCOVA.COM

		TRANSACTI	ON DETAILS					
Supplier / Dealer:	Supplier Ph	one:						
Supplier Contact:	Equipment Cost:							
Equipment Description:			Down Paym	nent:				
			Term Reque	ested:	24	36	48	60
			Equipment	State:	Nev	V	Used	
		BUSINESS IN	IFORMATION	J				
Business Type: Corpo	s Type: Corporation		Partnership		Other			
Legal Business Name:								
Trade / Operating Name of	of Business:							
Contact:		Email:						
Tel:	Fax:		Cell:					
Address:				City:				
Province: Post	al Code:	Years in	Business: In		dustry:			
Business Credit History:	Excellent	Good	Fair	Роо	r	Unknow	/n	
		ICIPALS / SHAREH	OLDERS INFO	DRMATION				
Name (First/Middle/Last)	:							
Address:			Telephone:					
City:		Province:		Posta	l Code:			
Date of Birth:					ously Bankrupt: Yes		5	No
Residence: Own / Rent / Other		Value of Home:	Mortgage		e Balance	e:		
Personal Credit History:	Excellent	Good	Fair	Poor		Unknown	l	
Name (First/Middle/Last)	:							
Address:			Telephone:					
ty: Pr		Province:	Postal Code:					
Date of Birth:		SIN #:	Previo		ously Bankrupt: Yes		S	No
Residence: Own / Rent / Other		Value of Home:	Mortgage Balance:		e:			
Personal Credit History:	Excellent	Good	Fair	Poor		Unknown		

Ver. 4C - 01-2018

I understand this is an application for business credit. I/We certify the information I/We have given you about myself and the business is accurate and complete and the product purchased is for business use only. The undersigned consents to Jocova Financial Services Corporation its successors and assigns ("Jocova") the collection, use, and disclosure to its affiliates, credit bureaus, reporting agencies, financial institutions, and businesses with whom each of the undersigned has had financial relationships and other references proved in support of this application (and disclosure by these parties to Jocova), of the provided herein and credit and financial information obtained from the above sources for the purposes of obtaining and using a credit information report and verifying current and ongoing creditworthiness of each of the undersigned and other information provided in connection with this application. Jocova may disclose credit and financial information connected with this application to future creditors and lenders that request credit references. SIN's (if provided) and other personal identifiers will be used solely for matching of credit bureau/reporting agency information and/or verifying the identity of the undersigned consents to the collection, use, and disclosure of personal information by Jocova and the persons referred to in the related lease, finance, or rental agreement for the above purposes and the purposes described in the related lease, finance, or rental agreement. We acknowledge that Jocova may transfer to, and store Information in, jurisdictions where Jocova does business. As a result, Information may be accessible to regulatory authorities in acordance with the laws of these gives dividuos. You further consent to receive electronic communications from us with regards to our dealings and/or any potential future promotions of services we may market to you.



Signature of Applicant

Signature of Co-Applicant (if applicable)

Verbal Consent (Office Use Only)

**** NOTE: For all applications requiring personal information, the applicant(s) must sign this form, or if taken via telephone, the above consent statement must be read and understood by the applicant(s) and their verbal consent obtained and date provided.