

- BORROWER
- BORROWER AND CO-BORROWER
- BORROWER AND SPOUSE
- BORROWER AND CORPORATION

MERCHANT LOAN

Date: _____

Merchant No.: _____

Purpose of the Loan: _____

TYPE OF LOAN: Fixed Rate Personal Loan on Promissory Note Renewable Rate Personal Loan on Promissory Note Other: _____

FINANCING Amount Financed _____ IAP Premium _____ EW Premium _____ Other Co Premium _____ Total Loan Amount _____ Loan Interest Rate _____ % Term of Loan _____ month Loan Amortization Period _____ month	IAP INSURANCE <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%; text-align: center;">Life</td> <td style="width: 15%; text-align: center;">Disability</td> <td style="width: 15%; text-align: center;">Life Insurance term (in months)</td> <td style="width: 15%; text-align: center;">Disability Insurance term (in months)</td> <td style="width: 15%; text-align: center;">Residual value life insurance</td> <td style="width: 15%; text-align: center;">None</td> </tr> <tr> <td>Applicant</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">[][]</td> <td style="text-align: center;">[][]</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Co-applicant</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">[][]</td> <td style="text-align: center;">[][]</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table> Waiting period: _____ days <input type="checkbox"/> Elimination (the insurance does not cover the waiting period) <input type="checkbox"/> Retroactive (the insurance does cover the waiting period)		Life	Disability	Life Insurance term (in months)	Disability Insurance term (in months)	Residual value life insurance	None	Applicant	<input type="checkbox"/>	<input type="checkbox"/>	[][]	[][]	<input type="checkbox"/>	<input type="checkbox"/>	Co-applicant	<input type="checkbox"/>	<input type="checkbox"/>	[][]	[][]	<input type="checkbox"/>	<input type="checkbox"/>	TYPE OF PROMOTION APPLICABLE TO FINANCING <input type="checkbox"/> Differed Payment (Monthly Interest Charged to Client): _____ (month) <input type="checkbox"/> Interest Paid by Merchant Until: Month: _____ Day: _____ Year: _____ <input type="checkbox"/> Subsidized Rate to Client _____ % <input type="checkbox"/> Other Promotion _____
	Life	Disability	Life Insurance term (in months)	Disability Insurance term (in months)	Residual value life insurance	None																	
Applicant	<input type="checkbox"/>	<input type="checkbox"/>	[][]	[][]	<input type="checkbox"/>	<input type="checkbox"/>																	
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BORROWER'S PERSONAL INFORMATION

Last Name	First Name	Middle Name	Address	Number	Street/Apt.
City			Province	Postal Code	Home Telephone ()
Date of Birth			SIN (Optional*)	Type and Credit Card Number	Other
Month:	Day:	Year:			

RESIDENTIAL STATUS

<input type="checkbox"/> OWNER OCCUPANT Monthly Rental Income \$ _____ Mortgage Balance \$ _____ Monthly Mortgage Payment and Taxes (P. I. T.) \$ _____ Municipal Property Value \$ _____	<input type="checkbox"/> TENANT Monthly Rent \$ _____ <input type="checkbox"/> OTHER Monthly Rent \$ _____
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PERSONAL INFORMATION **CO-BORROWER** **SPOUSE** **CORPORATION**

Last Name	First Name	Middle Name	Address	Number	Street/Apt.
City			Province	Postal Code	Home Telephone ()
Date of Birth			SIN (Optional*)	Type and Credit Card Number	Other
Month:	Day:	Year:			

RESIDENTIAL STATUS

<input type="checkbox"/> OWNER OCCUPANT Monthly Rental Income \$ _____ Mortgage Balance \$ _____ Monthly Mortgage Payment and Taxes (P. I. T.) \$ _____ Municipal Property Value \$ _____	<input type="checkbox"/> TENANT Monthly Rent \$ _____ <input type="checkbox"/> OTHER Monthly Rent \$ _____
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BORROWER'S EMPLOYMENT INFORMATION

Current Employment Status: <input type="checkbox"/> Self Employed <input type="checkbox"/> Full-Time <input type="checkbox"/> Wage-Earning <input type="checkbox"/> Part-Time <input type="checkbox"/> Retired <input type="checkbox"/> Seasonal	Employer or Business Name	Telephone No. ()	Job Title	Since (mm/yy)
	Net Annual Income \$	Gross Annual Income \$	Other Annual Income \$	

EMPLOYMENT INFORMATION **CO-BORROWER** **SPOUSE** **CORPORATION**

Current Employment Status: <input type="checkbox"/> Self Employed <input type="checkbox"/> Full-Time <input type="checkbox"/> Wage-Earning <input type="checkbox"/> Part-Time <input type="checkbox"/> Retired <input type="checkbox"/> Seasonal	Employer or Business Name	Telephone No. ()	Job Title	Since (mm/yy)
	Net Annual Income \$	Gross Annual Income \$	Other Annual Income \$	

FINANCIAL INFORMATION

Total Assets \$	Total Debts \$	Payments (monthly) \$
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I hereby authorize Laurentian Bank of Canada (the "Bank"):

- To obtain information on my solvency or financial situation from any persons authorized by law, any persons mentioned in the credit reports obtained and any other financial institutions until any outstanding amount is fully repaid.
- To use my social insurance number for identification purposes and for data consolidations, for the services rendered by the Bank and its affiliates.
- To share the information it holds on myself with any other persons authorized by law, any personal information agents, any financial institutions, any co-applicants or, with my consent, any other persons who so request it.
- To communicate to the merchant, through whom I am making this applications the results of any credit report and the information justifying its decision to grant or refuse the loan.

I represent and warrant that all personal information set out herein is true and complete.

Signature of Borrower

Signature of Spouse/Co-Borrower

* Clients who do not wish to provide their SIN, must provide a credit card number as well as the type of the card to validate their identity.

RESERVED FOR USE BY MERCHANT

We hereby certify that the aforementioned borrower(s) will be purchasing a product from us for the amount stated above, that the identity of the borrower(s) has been verified and that the client(s) has (have) read and signed this document in our presence.

Company Name

Representative

Fax No.