

## Personal Information

First Name	Initial	Surname	S.I.N	Date of Birth MM/DD/YYYY
Marital Status:		No. of dependents (including spouse):		
Address: (Apartment/Unit # /P.O. Box/Street and number)		City/Town	Territory/Province	Postal Code
Phone: Home		Business	Email:	
Principal Bank/Financial Institution	Address		Savings A/C No.	Chequing A/C No.
Have you ever borrowed before? Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, What institution?  Date:  Amount : \$		

Assets (list and describe all assets – schedules on reverse)		Liabilities (list credit cards and other liabilities including alimony and child support)	
Cash	\$		Balance Owing
Cash – other financial institutions		Bank Loans (see schedule F)	\$
Life insurance C.S.V. (see schedule C)		Mortgages on Real Estate (see schedule B)	
Retirement Accounts (See schedule D)		Credit Cards (please itemize)	
Marketable Securities (see schedule A)		1.	
Account and Loans, Receivable (please itemize)		2.	
1.		3.	
2.		Other Obligations (please itemize)	
3.		1.	
Automobiles Make/Yr.		2.	
Make/Yr.		3.	
Real Estate (see schedule B)		(B) Total Liabilities	\$
Business Interest (see schedule E)		(A - B) Net Worth	\$
Other Assets (please itemize) 1.		Sundry Obligations	
2.		Are you personally supporting contingent obligations not listed above? (e.g. co-signer/endorser/guarantor)? Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.		If yes, please indicate liability and provide details on the amount, to whom and nature of obligations:	
(A) Total Assets	\$		

## Present Annual Income and Expenses

Your Gross Income		Your Expenses	
Annual Salary or Wages	\$	Mortgage or rental payments	\$
Commissions & Bonuses		Real Estate Taxes	
Dividends & Interest		Federal and provincial Income Taxes	
Rental Income (see schedule B)		Insurance Premiums	
Other Income (Please Itemize)		Credit Cards	
1		Consumer Loan Payments	
2		Alimony, Child Support Or Maintenance Payments	
Subtotal	\$	Other Expenses (Please Itemize)	
Spouse's Income		1	
Annual Salary or Wages		2	
Other Income (Please Itemize)		3	
1		4	
2		Total Annual Income	\$
Total Annual Income	\$		

## Employment Information

Employer's Name and Address	Years of Employment	Telephone No.
Occupation	Previous Employer's Name and Address	Telephone No.

## Data on Spouse

First Name	Initial	Surname	S.I.N.	Date of Birth (MM/DD/YYYY)
Occupation	Employer's Name and Address		Years of Employment	Telephone No.

**General information ( if you say YES to any of these questions, please provide details)**

Have you ever had an asset repossessed? Yes\_\_\_ No\_\_\_ Details  
 Are you involved in any claims or lawsuits? Yes\_\_\_ No\_\_\_  
 Have you ever declared bankruptcy? Yes\_\_\_ No\_\_\_  
 Do you owe any back taxes? Yes\_\_\_ No\_\_\_

**Schedule A: Markable Securities, Stocks and Bonds**

No. of Units or Shares	Description	In name of whom	Market Value Per Share	Where Quoted or Listed	Total Market Value	Pledged as Collateral
			\$		\$	Yes No
			\$		\$	Yes No
			\$		\$	Yes No

**Schedule B: Real Estate (1) Primary Residence, (2) Other**

**1** Street name and number City/Town Terr/Prov Legal Description % Ownership

Title in Name Of	Date Acquired	Purchase Price	Market Value	Gross Annual Rental Income	Net Monthly Rental Income	Annual Taxes, Insurance, Maintenance and Misc.
		\$	\$	\$	\$	\$

Name of Mortgage Holder (e.g. Financial institution) Amount of mortgage Annual Mortgage Payments

1<sup>st</sup> 2<sup>nd</sup> 1<sup>st</sup> \$ 2<sup>nd</sup> \$ 1<sup>st</sup> \$ 2<sup>nd</sup> \$

**2** Street name and number City/Town Terr/Prov Legal Description % Ownership

Title in Name Of	Date Acquired	Purchase Price	Market Value	Gross Annual Rental Income	Net Monthly Rental Income	Annual Taxes, Insurance, Maintenance and Misc.
		\$	\$	\$	\$	\$

Name of Mortgage Holder (e.g. Financial institution) Amount of mortgage Annual Mortgage Payments

1<sup>st</sup> 2<sup>nd</sup> 1<sup>st</sup> \$ 2<sup>nd</sup> \$ 1<sup>st</sup> \$ 2<sup>nd</sup> \$

**Schedule C: Individual and Group Insurance**

Insurance Company	Beneficiary	Face Amount	Policy Loan	Cash Surrender Value
		\$		\$
		\$		\$

**Schedule D: Retirement Accounts (tax sheltered investment: e.g. RRSPs)**

Quantity	Administration (Financial institution, Broker, ect..)	Description (RRSPs, DPSPs, RHOSP, pension fund, etc....)	In Name Of Whom	Current Value Per Unit	Total Current Value
				\$	\$
				\$	\$

**Schedule E: Business Interest**

List all Businesses in Which You are an Owner	%Owner	Position/Title	Net Worth of Business	Type of Business	Year Establish
			\$		
			\$		

**Schedule F: Bank Loans (exclude real estate loans)**

Lender	Purpose	Date of loan	Payments (per Yr/Qtr/MO)	Collateral description	Original amount	Outstanding Balance
			\$		\$	\$
			\$		\$	\$

**Declaration**

The undersigned hereby declare(s) that all the information provided herein and on the accompanying statements is to the best of my knowledge true, complete and correct and understand it will be used by the Bank to determine credit worthiness. The proceeds of the loan applied for will be used for business purposes and not for personal, family or household purposes.

The Undersigned further consent(s) to dānā Nāye Ventures making any inquiries it deems necessary to reach a decision on this application, and consent (s) to the disclosure at any time of any credit information about me/us to any credit reporting agency or to any one with whom I/we are financial relations

Signature of applicant(s)

Signature of applicant(s)

Date