

**COMMERCIAL CREDIT APPLICATION**

TRANSACTION INFORMATION			
TRANSACTION TYPE	<input type="checkbox"/> Lease <input type="checkbox"/> New	<input type="checkbox"/> Finance <input type="checkbox"/> Used/Demonstrator	<input type="checkbox"/> With Co-Applicant (please complete separate application)
TERM	MAKE/MODEL/YEAR	MSRP	DOWNPAYMENT
PAYMENT	MAKE/MODEL/YEAR OF TRADE-IN	ESTIMATED TRADE-IN VALUE	AMOUNT OWED ON TRADE-IN
\$		\$	\$
DATE	DEALER NAME	SALESPERSON/BUS. MANAGER	

APPLICANT			
BUSINESS NAME		YEARS IN BUSINESS	
PRESENT ADDRESS		NATURE OF BUSINESS	
CITY	PROVINCE	E-MAIL ADDRESS	PHONE NUMBER CELL NUMBER
DATE OF	<input type="checkbox"/> Incorporation _____ <input type="checkbox"/> Partnership _____ <input type="checkbox"/> Proprietorship _____	DATE OF LAST FINANCIAL STATEMENT	COPIES AVAILABLE? <input type="checkbox"/> Yes <input type="checkbox"/> No
ACCOUNTING FIRM	CONTACT		PHONE NUMBER

OWNERSHIP			
OWNER NAME	TITLE	% OWNED	SIGNING AUTHORITY? <input type="checkbox"/> Yes <input type="checkbox"/> No
OWNER NAME	TITLE	% OWNED	SIGNER? <input type="checkbox"/> Yes <input type="checkbox"/> No
OWNER NAME	TITLE	% OWNED	SIGNER? <input type="checkbox"/> Yes <input type="checkbox"/> No
VEHICLE DRIVER	ADDRESS		PHONE NUMBER

BANK REFERENCES			
BANK REFERENCE	BRANCH	CONTACT	<input type="checkbox"/> Current Account Number: _____ <input type="checkbox"/> Operating Line of Credit: _____ <input type="checkbox"/> Other Loans: _____
OTHER BANK, TRUST COMPANY OR CREDIT UNION	BRANCH	CONTACT	<input type="checkbox"/> Current Account Number: _____ <input type="checkbox"/> Operating Line of Credit: _____

PREVIOUS VEHICLES					
<input type="checkbox"/> Leased <input type="checkbox"/> Financed	NAME OF FIRM/PHONE NUMBER	VEHICLE TYPE	ORIGINAL BALANCE	CURRENTLY OWING	MONTHLY PAYMENT
			\$	\$	\$
<input type="checkbox"/> Leased <input type="checkbox"/> Financed	NAME OF FIRM/PHONE NUMBER	VEHICLE TYPE	ORIGINAL BALANCE	CURRENTLY OWING	MONTHLY PAYMENT
			\$	\$	\$

CREDIT REFERENCES			
NAME OF COMPANY	PHONE NUMBER	CONTACT	HIGH CREDIT
NAME OF COMPANY	PHONE NUMBER	CONTACT	HIGH CREDIT
NAME OF COMPANY	PHONE NUMBER	CONTACT	HIGH CREDIT

**Please attach your last two year end accountant prepared financial statements along with a current in-house interim financial statement if available. Financial statements should include balance sheet, income statement, statement of cash flows, profit and loss statement, and accountant's comments along with all applicable notes. All financial information provided will be held in strict confidence.**

**LEGAL ACTIONS:**

PRIOR BANKRUPTCY	YES <input type="checkbox"/> NO <input type="checkbox"/>	JUDGEMENTS	YES <input type="checkbox"/> NO <input type="checkbox"/>	LAW SUIT PENDING	YES <input type="checkbox"/> NO <input type="checkbox"/>
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**CONSENT AND CERTIFICATION:**  
 I, the undersigned commercial purchaser/lessee, acknowledge and agree that, upon receipt of a duly signed copy of this Commercial Credit Application, Mercedes-Benz Financial Services, a business unit of Mercedes-Benz Financial Services Canada Corporation ("MBFS") and the Dealer shall be entitled and authorized to establish a file on me containing personal information.

The object of the file shall be to allow MBFS and its worldwide affiliates and assignees (1) to evaluate my credit and solvency; (2) to make a decision with regard to the Commercial Credit Application and the possible execution of an agreement, including a contract for lease or financing of a purchase of a motor vehicle; (3) to monitor, record and determine during the term of such a contract my compliance with all or part of the obligations contained therein; (4) to answer any questions I might have with respect to the Commercial Credit Application, any contract I may enter into and the file in general; (5) to record, manage, evaluate and collect, if applicable, any amount owing by me to MBFS; (6) to develop and implement customer programs; (7) to maintain and use the information as a credit history; and (8) to meet legal and regulatory requirements.

To achieve the object of the file, I understand that the personal information contained in my file shall be made available only to the employees, representatives and agents of MBFS and its worldwide affiliates and assignees who require it in the course of the performance of their duties or mandates. The personal information in my file will be used to make any relevant decisions in order to achieve the object of the file.

The file relating to me shall be kept at my MBFS Business Centre office (the address of which can be supplied by the Dealer). MBFS shall inform me in writing if my file is moved to a new location. I understand that I shall have the right: (1) to obtain access to the personal information in my file and (2) to rectify any personal information in my file which is inaccurate, incomplete, ambiguous or out-of-date. I shall be entitled to exercise either one of these rights by addressing a written request for access or rectification to my MBFS Business Centre office in care of the Access to Information Manager.

I authorize MBFS and the Dealer to collect the necessary personal information concerning me to fulfill the object of the file, from third persons, including credit agencies, information and collection agencies, credit reporting bureaus, financial institutions, insurance companies, insurance brokers, my past, present and future employers, creditors and landlords, motor vehicle dealers, government agencies, my spouse or any other person who has or will have information related to my credit history and my solvency, my whereabouts or the whereabouts or condition of any property that is or has been owned, held or leased by me. I specifically consent to the release and disclosure of personal information by such persons to MBFS.

If I request a credit life or disability insurance, I expressly authorize any doctor, physician, a member of a professional corporation in the health sector, health establishment, clinic, hospital or medical information office or a health information custodian to disclose, release and communicate to MBFS personal information, including personal health information, concerning me and expressly authorize MBFS to disclose personal information to them.

I expressly authorize MBFS and the Dealer to disclose personal information concerning me to each other, to any of their worldwide affiliates and assignees, to other third persons including advertising and marketing agencies dealing with MBFS for the development and implementation of customer programs, to credit agencies, to information and collection agencies, to credit reporting bureaus, to financial institutions, to insurance companies, to insurance brokers, to vehicle manufacturers, to motor vehicle dealers, to auction houses, to my creditors, to persons to whom I have applied for credit, to assignees and agents of such third parties, and to any other person to whom MBFS or the Dealer deem it necessary to further my interest or to fulfill the object of the file.

I specifically consent to the use by MBFS of my Social Insurance Number, if supplied, for the purpose of recording, identifying and retrieving my personal information. Supplying my Social Insurance Number helps MBFS distinguish me from others with similar information and accelerates the process of achieving the object of the file.

I have read this Commercial Credit Application and the consent respecting the collection, use, release, disclosure, communication and holding of personal information concerning me. I understand the necessity of giving such a consent which is given voluntarily without any coercion and which will be valid and irrevocable for so long as it is needed in order to achieve the object of the file. I acknowledge that the Dealer or its representatives have no authority to waive or modify any question in the Commercial Credit Application, or bind MBFS by making a promise or representation or by giving or receiving information without the written consent of MBFS.

I accept that a photocopy of the Commercial Credit Application and the consent or a facsimile of same shall be considered as valid as the original.

I acknowledge that the Commercial Credit Application and the Consent and Certification were drafted in the English language in accordance with my request. Je déclare avoir exigé que cette demande et consentement soient rédigés et complétés en langue anglaise.

I declare and warrant that the information that I have provided above is true, accurate and complete and that it is not false or misleading in any way. I further declare and warrant that a bankruptcy proceeding is neither presently in progress nor anticipated and acknowledge a receipt of a copy of this Commercial Credit Application. If this Commercial Credit Application is to be supported by the personal guarantees of the company principals, please attach a signed personal financial statement for each guarantor.

I acknowledge that a consumer/personal report containing credit, medical or personal information will be referred to in connection with the Application. I consent to the preparation of such a report and to MBF and the Dealer obtaining such a report from credit bureaus/consumer reporting agencies.

Applicant Signature

SIGNATURE OF APPLICANT	DATE
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