



Tel. (514) 737-3577
 Fax: (514) 737-0514

LEASEE STATEMENT

- Individual
- Partnership
- Corporation

CORPORATE LESSEE COMPLETE THIS SECTION			
Print Full Business Name	Type of Business	Year Started	Business Phone
Business Address: No. & Street	City	Province	Postal Code
Business Banking: Bank Name	Address		
Checking Account No.	Person to Contact		
Previous Bank if above less than 2 years:	Address		
Checking Account No.	Person to Contact		
Company from which last car leased/financed			
Principal Operator: Name	Address		
	Position	Years Associated	

INDIVIDUAL LESSEE COMPLETE THIS SECTION			
Full Name: First	Middle	Last	Social Insurance No.
Date of Birth	<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced		Dependents
Home Address No. & Street	City	Province	Postal Code
	Apartment No.	How long? Years Months	Home Phone No.
Employed By: Address	City	Province	Phone No. Years Associated Since
Position in Company	How long? Years Months	Income Per Month	\$
Spouse Given Name	Employed By	Address	
	How long? Years Months	Income Per Month	\$
Personal Checking Account: Name of Bank	Address		Checking Account No.
Other Bank Relationships: Name of Bank			
Name & Address of Personal References			Relationships
Personal			Years Known

In this consent (a) the words "I" and "me" refer to each of the undersigned applicant and, if applicable, co-applicant, and (b) the words "you" and "your" refers to the undersigned applicant and, if applicable, co-applicant.

I authorize and consent to your conducting credit investigations concerning me and to your receipt and exchange of personal, credit and information concerning me (including my social insurance number). Without limitation, I authorize and consent to your receipt of personal information and credit information with any credit reporting agency, credit bureau, financial institution and other person or entity with whom I have or propose to have a financial relationship.

I authorize credit reporting agencies, credit bureaus, financial institutions and other persons and entities with whom I have or propose to have a financial relationship to give you personal information and credit information.

If I have previously consented to Omega Leasing Canada Ltd. conducting a credit investigation concerning me, I authorize Omega Leasing Canada Ltd. to give personal information concerning me to the dealer and each financier. I acknowledge that I may update any personal information concerning me that Omega Leasing Canada Ltd. may have on file by telephoning Omega Leasing Canada Ltd. at (514) 737-3577.

I authorize and consent to your use of personal information and credit information necessary to the purposes of the transaction.

This consent is valid for the period of time during which it would be necessary for the accomplishment of the transaction.

I Agree