



Polaris Leasing Ltd.
LEASE APPLICATION

Toll Free Phone: 1-800-661-5327
Toll Free Fax: 1-800-561-5327
Website: www.polarisleasing.com

APPLICANT INFORMATION:

Company's Operating Name: _____

Principal's Full Legal Name(s): _____

Type of Business or Farm Operation: _____

Legal Structure (Please circle choice): Incorporated Partnership Proprietorship

Amount of Farm Land Rented: _____ Owned: _____ Years In Business: _____

Address: _____ City: _____ Province: _____ Postal Code: _____

Phone No.: _____ Fax No.: _____ Cell No.: _____

Date of Birth: _____ S.I.N. #: _____ Gross Yearly Income:\$ _____

Secondary Income: \$ _____ Source of this Income: _____

TRADE REFERENCES (Local Fuel Supplier, Local Feed/Fertilizer Supplier, Local Grain Elevator, Banks and Local Co-op)

Name: _____ Fax # _____ Phone No.: _____

Name: _____ Fax # _____ Phone No.: _____

DEALER INFORMATION

Supplier Name: _____ Address: _____

City/Prov: _____ Postal Code: _____

Supplier Rep: _____ Phone No.: _____ Fax No.: _____

EQUIPMENT DESCRIPTION: (Year, Make, Model, Serial No.)

Lease Cost: \$ _____ (before taxes) Lease Term: 24 36 48 60 <<Circle choice>> Payments: M Q S A

The undersigned certifies the above information to be true and correct. BY SIGNING BELOW, I/WE CONSENT TO THE OBTAINING FROM ANY CREDIT REPORTING AGENCY OR CREDIT GRANTOR, SUCH INFORMATION AS POLARIS LEASING MAY REQUIRE AT ANY TIME IN CONNECTION WITH THE CREDIT HEREBY APPLIED FOR, and consent to the disclosure at any time of any information concerning the undersigned to any credit reporting agency or to any credit grantor with whom the undersigned has financial relations.

Signature of Principal (s): X _____ Date: _____