



EXPRESS DECISION APPLICATION

Phone 905-726-5500 Fax 905-726-5555
238 Wellington St. E, 3rd Floor
Aurora (Ontario) L4G 1J5

Dealer:		Contact:	
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APPLICANT INFORMATION:

Business Type	Individual: <input type="checkbox"/>	Corporation: <input type="checkbox"/>	Partnership: <input type="checkbox"/>	Proprietorship: <input type="checkbox"/>	Other: <input type="checkbox"/>
Does the business sub-lease or rent any of its equipment to 3 rd parties: Yes <input type="checkbox"/> No <input type="checkbox"/>					
Name of Borrower				S.I.N. #	
Driver's License #				Prov. of issue	
Mailing Address	Email:			Birth Date	
City / Town	Province			Postal Code	
Telephone	Fax #			Cell #	
How many years at current address?			Renting: Yes <input type="checkbox"/> No <input type="checkbox"/>	Monthly rental: \$ _____	

OWNER/PARTNER NAME(S): (required if Borrower is a Corporation or Partnership)

Owner/Partner		% Owned		Title	
Driver's License #		Prov. of issue		S.I.N. #	
Mailing Address	Email:			Birth Date	
City / Town	Province			Postal Code	
Telephone	Fax #			Cell #	
How many years at current address?			Renting: Yes <input type="checkbox"/> No <input type="checkbox"/>	Monthly rental: \$ _____	

Owner/Partner		% Owned		Title	
Driver's License #		Prov. of issue		S.I.N. #	
Mailing Address	Email			Birth Date	
City / Town	Province			Postal Code	
Telephone	Fax #			Cell #	
How many years at current address?			Renting: Yes <input type="checkbox"/> No <input type="checkbox"/>	Monthly rental: \$ _____	

INFORMATION ON FINANCED EQUIPMENT: NEW: USED:

Year		Serial #		Kilometres	
Make		Engine Mfg		Trans Mfg	
Model		Engine H.P.		Trans Speed	
Sleeper		Front axle		Rear Axle	

ATTACHMENT DETAILS: _____

EXPERIENCE: First truck purchase? Yes No Existing VFS customer? Yes No

# of Years Driving Truck		Purpose of Request	Expansion <input type="checkbox"/> Replacement <input type="checkbox"/>
# of Years Owner Operator		Are Trucks used in Farming	Yes <input type="checkbox"/> No <input type="checkbox"/>
# of Trucks Owned / Leased		# of Trailers Owned / Leased	
Annual Revenue in last fiscal year		Under \$1.0M <input type="checkbox"/>	Between \$1.0M to \$5.0M <input type="checkbox"/>
		Between \$5.1M to \$50M <input type="checkbox"/>	Over \$50M <input type="checkbox"/>
How will this truck be used		Local / City: Under 150,000 km per year <input type="checkbox"/>	
		Owner Operator: Under 225,000 Km per year <input type="checkbox"/>	
		Super single / Team: Over 225,000 Km per year <input type="checkbox"/>	

HAULING REFERENCES:

Company (1)		Length of Employment	
Contact / Tel		Products Hauled	
Rate per Mile		Gross Mthly Revenue \$	

Company (2)		Length of Employment	
Contact / Tel		Products Hauled	
Rate Per Mile		Gross Mthly Revenue \$	

DANGEROUS GOODS & INSURANCE COVERAGE:

Are you or will the financed equipment be engaged in the handling, transportation or storage of Hazardous Materials / Dangerous Goods? YES NO (If yes please complete and submit a Dangerous Goods Questionnaire)
Please Note: VFS does not provide financing or leasing for any vehicle or equipment engaged in the transportation, storage or handling of any materials designated as Environmentally Hazardous, Dangerous or Radioactive unless exception is approved.

Name of Broker	Email:	Public Liability Coverage \$	
Contact Name		Physical Damage Deductible \$	
Deductible buy down via haul source Yes <input type="checkbox"/> No <input type="checkbox"/>		Amount buy down if known \$	

BANKING REFERENCE:

Name of Bank		Telephone #	
Contact Name		Credit Line (C/L)	Yes <input type="checkbox"/> No <input type="checkbox"/>

