



CREDIT APPLICATION

(Complete in block letters)

E-mail: trailer@clecapital.

LESSEE INFORMATION

Source:

Legal Name (company):

Address:	Telephone:
City/Province:	Cellular:
Postal Code:	Fax:
Contact:	Email:
Type of Business:	Since:

SUPPLIER INFORMATION

Name: Program No:

Address:	Contact:
City/Province:	Telephone:
Postal Code:	Fax:

EQUIPMENT DESCRIPTION (attach quote to the credit application)

Quantity	Description	Price

PAYMENT TERMS

Total Cost (\$):	Term (months):
Deposit (\$):	Exchange Value (\$):
Financed Amount (\$):	

PERSONAL INFORMATION

Name:	Name:
Address:	Address:
City/Province:	City/Province:
Postal code:	Postal code:
Telephone (home):	Telephone (home):
Social Ins. Number:	Social Ins. Number:
Date of Birth:	Date of Birth:

CONSENT PERSONAL INFORMATION AND SIGNATURE: The undersigned confirms that the above information is true. In addition, it authorizes Hitachi Capital Canada Corp., its subsidiary CLE Capital Inc. and / or Hitachi Capital America Corp. (hereinafter referred to collectively as "Hitachi"), or any other financial institution, to request and exchange any information Regarding solvency, particularly with respect to applications to credit bureaus and their disclosure at any time . The undersigned acknowledges that Hitachi has a serious and legitimate interest in collecting personal information about itself from itself or from third parties in order to operate its business. He acknowledges the very fact that Hitachi can build a file with the personal information collected. The file thus constituted will be kept at one of Hitachi's places of business and may only be consulted by authorized persons. The undersigned will have the right to access this file by making a written request in this regard. The undersigned also acknowledges that Hitachi discloses any financial information or other material in connection with the granting of such assignment. This consent may be withdrawn at any time by communicating in writing with Hitachi.

****If you are unable to sign this Credit application, please call our interactive voicemail at 1-800-373-7393 extension 8889 to give your verbal consent.**

Signature (A)

Signature (B)

Date