

NET WORTH STATEMENT (PLEASE PRINT)

FULL NAME: _____
FILL ADDRESS: _____ **TEL:** _____
DATE OF BIRTH: _____ **SIN:** _____
EMPLOYER: _____ **ANNUAL INCOME:** _____
SPOUSE EMPLOYER: _____ **SPOUSE INCOME:** _____

ASSETS

Total Value

Cash in Chequing Account /Bank Name _____	\$ _____
Cash in Saving Account /Bank Name _____	_____
Real Estate, Home (Present Value) _____	_____
Other Real Estate (Present Value) _____	_____
Listed Stocks and Bonds (Present Value) _____	_____
Automobile(s) _____	_____
& Description _____	_____
Equity in Your Own Business _____	_____
Description _____	_____
Money Owed to You _____	_____
Description _____	_____
Other Assets _____	_____

TOTAL ASSETS

\$ _____

LIABILITIES

Total Owing

Mortgage/Rent-monthly payment (\$ _____) _____	\$ _____
Mortgage Company/Address _____	_____
Auto Loan-monthly payment (\$ _____) _____	_____
Name/Address _____	_____
Other Loans/Line of Credit-monthly payment (\$ _____) _____	_____
Name/Address _____	_____
Notes Payable/Other Obligations-monthly payment (\$ _____) _____	_____
Description _____	_____
Credit Cards-monthly payment (\$ _____) _____	_____
Description _____	_____

TOTAL LIABILITIES

\$ _____

NET WORTH (ASSETS - LIABILITIES) Owing

\$ _____

The undersigned certifies the above information to be true and correct. By signing below, I/we consent to Capital Connect and its sources (banks – ex. Royal Bank, trust companies – ex. TD Can Trust and other financial institutions and private sources) obtaining from any Credit Reporting Agency, Information as it may require at any time in connection with the credit hereby applied for, and consent to disclosure at any time of any information concerning the undersigned to any credit reporting agency with whom the undersigned has financial relations.

Signature of Applicant: _____

DATE: _____

APPLICATION QUESTIONS – Business Lines/Loans

(Please answer ALL questions)

Business Info:

Business Full Name:

Business Full Address:

Business Tel:

Business Fax:

CCRA Business Number (if applicable):

Trade Name of Business (if applicable):

Briefly describe the nature of Business:

Business Start-up date:

Key Principle owned Business since:

Number of Employees: Full Time:

Part Time:

Business Structure: Sole Proprietorship:

Partnership:

Corporation:

Principals of Business:

Key Principal: Ownership % F/T P/T Role/Function:

Principal 2: Ownership % F/T P/T Role/Function:

Principal 3: Ownership % F/T P/T Role/Function:

Fiscal Year Ended (mm/dd/yyyy):

Business Sales Revenue (yearly):

Net Income after Taxes (yearly):

Total Business Bank Deposits (monthly):

Business Debt (exclude debt being paid out):

Personal Info:

Principal's Full Name:

Principal's Full Address:

Date of Birth:

SIN:

Home Tel:

Business Tel:

Cell:

Spousal Full Name:

Personal Gross Monthly Income from all Sources:

Spousal Gross Monthly Income:

Have you had Bankruptcy in the last 7 years?

Personal Banking Institution(s):

Business Banking Institution(s):