



**MERCANTILE FINANCE**

Suite 1450, 25 King St. West.  
 Commerce Court North P.O. Box 233  
 Toronto, Ontario M5L 1E8  
 Tel: 416-368-3683  
 Fax: 416-368-3684

**APPLICANT INFORMATION**

|                                 |             |                  |            |                     |               |  |  |
|---------------------------------|-------------|------------------|------------|---------------------|---------------|--|--|
| <b>FULL NAME:</b>               |             |                  |            |                     |               |  |  |
| <b>TRADE NAMES:</b>             |             |                  |            |                     |               |  |  |
| <b>ADDRESS:</b>                 |             |                  |            |                     |               |  |  |
| <b>City:</b>                    |             | <b>Province:</b> |            | <b>Postal Code:</b> |               |  |  |
| <b>CONTACT INFORMATION:</b>     | <b>TEL:</b> |                  | <b>FAX</b> |                     | <b>e-mail</b> |  |  |
| <b>PRIMARY CONTACT PERSON:</b>  |             |                  |            |                     |               |  |  |
| <b>DESCRIPTION OF BUSINESS:</b> |             |                  |            |                     |               |  |  |

**COMPANY PRINCIPALS**

|                                       |  |                    |  |                     |                    |  |  |                 |  |
|---------------------------------------|--|--------------------|--|---------------------|--------------------|--|--|-----------------|--|
| <b>Shareholder/Partner/Owner Name</b> |  |                    |  |                     | <b>Birth Date:</b> |  |  |                 |  |
| <b>Title:</b>                         |  | <b>% Ownership</b> |  | <b>Tel. No:</b>     |                    |  |  |                 |  |
| <b>Address:</b>                       |  |                    |  |                     |                    |  |  | <b>Fax. No:</b> |  |
| <b>City:</b>                          |  | <b>Province:</b>   |  | <b>Postal Code:</b> |                    |  |  |                 |  |

|                                       |  |                    |  |                     |                    |  |  |                 |  |
|---------------------------------------|--|--------------------|--|---------------------|--------------------|--|--|-----------------|--|
| <b>Shareholder/Partner/Owner Name</b> |  |                    |  |                     | <b>Birth Date:</b> |  |  |                 |  |
| <b>Title:</b>                         |  | <b>% Ownership</b> |  | <b>Tel. No:</b>     |                    |  |  |                 |  |
| <b>Address:</b>                       |  |                    |  |                     |                    |  |  | <b>Fax. No:</b> |  |
| <b>City:</b>                          |  | <b>Province:</b>   |  | <b>Postal Code:</b> |                    |  |  |                 |  |

|                                       |  |                    |  |                     |                    |  |  |                 |  |
|---------------------------------------|--|--------------------|--|---------------------|--------------------|--|--|-----------------|--|
| <b>Shareholder/Partner/Owner Name</b> |  |                    |  |                     | <b>Birth Date:</b> |  |  |                 |  |
| <b>Title:</b>                         |  | <b>% Ownership</b> |  | <b>Tel. No:</b>     |                    |  |  |                 |  |
| <b>Address:</b>                       |  |                    |  |                     |                    |  |  | <b>Fax. No:</b> |  |
| <b>City:</b>                          |  | <b>Province:</b>   |  | <b>Postal Code:</b> |                    |  |  |                 |  |

**BANK INFORMATION**

|                       |  |                       |  |                     |                          |                          |                |  |
|-----------------------|--|-----------------------|--|---------------------|--------------------------|--------------------------|----------------|--|
| <b>Bank Name:</b>     |  |                       |  |                     | <b>Acct. No.:</b>        |                          |                |  |
| <b>Street Address</b> |  |                       |  |                     | <b>Date Opened:</b>      |                          |                |  |
| <b>City:</b>          |  | <b>Province:</b>      |  | <b>Postal Code:</b> |                          |                          |                |  |
| <b>Phone No.</b>      |  | <b>Fax No:</b>        |  | <b>Loans</b>        | <b>Yes</b>               | <b>No</b>                | <b>Amount:</b> |  |
|                       |  |                       |  |                     | <input type="checkbox"/> | <input type="checkbox"/> |                |  |
| <b>Contact Name:</b>  |  | <b>Contact Title:</b> |  |                     |                          | <b>Security:</b>         |                |  |
|                       |  |                       |  |                     |                          |                          |                |  |

## FINANCING REQUESTED

|  |               |                               |                           |
|--|---------------|-------------------------------|---------------------------|
| <b>Purpose of Financing Request:</b>   |               | <b>Amount and Currency:</b>   |                           |
| <b>Contract Terms:</b>   |               |                               |                           |
| <b>Buyer Name:</b>   |               |                               |                           |
| <b>Address:</b>  |               |                               |                           |
| <b>City:</b>   |               | <b>State:</b>                 | <b>Country:</b>           |
| <b>Contact Name:</b>   |               | <b>Contact Title:</b>         | <b>Current Sales Vol.</b> |
| <b>Has the company ever filed for Bankruptcy or other creditor protection?</b> | <b>Yes/No</b> | <b>If Yes please explain:</b> |                           |
| <b>Do you currently have any financing/receivables relationship with EDC</b>   | <b>Yes/No</b> | <b>If Yes please explain:</b> |                           |

### REFERNCES

|                         |  |              |  |                  |  |
|-------------------------|--|--------------|--|------------------|--|
| <b>Lawyer:</b>          |  | <b>Firm:</b> |  | <b>Tel. No.:</b> |  |
| <b>Accountant:</b>      |  | <b>Firm:</b> |  | <b>Tel. No.:</b> |  |
| <b>Insurance Agent:</b> |  | <b>Firm:</b> |  | <b>Tel. No.:</b> |  |

### SUPPLIERS

|                           |  |                          |  |                  |  |
|---------------------------|--|--------------------------|--|------------------|--|
| <b>Principal Supplier</b> |  | <b>Product Supplied:</b> |  | <b>Tel. No.:</b> |  |
| <b>Principal Supplier</b> |  | <b>Product Supplied</b>  |  | <b>Tel. No.:</b> |  |
| <b>Principal Supplier</b> |  | <b>Product Supplied</b>  |  | <b>Tel. No.:</b> |  |

In support of your application for financing with **Mercantile Finance Services Ltd.** you will be required to submit some or all of the following documentation:

- |  |  |
|--|--|
| <input type="checkbox"/> Copies of Articles of Incorporation and amendments;<br><input type="checkbox"/> Copy of registered Trade Name;<br><input type="checkbox"/> Copies of 3 years complete financial statements;<br><input type="checkbox"/> Copies of most recent AR & AP ageing; | <input type="checkbox"/> Description of Companies products or brochure;<br><input type="checkbox"/> Financial projections for the next fiscal year;<br><input type="checkbox"/> Projections related to the financing request;<br><input type="checkbox"/> Such other information as may be required. |
|--|--|

It is not necessary that the documentation accompany this form when submitting it to MFSL, however, should MFSL agree to consider your request all this information and documentation will be required.

*I/we hereby certify that the information provided herein is true and accurate to the best of my/our knowledge. I/we give permission for Mercantile Finance Services Ltd. or its affiliates, to solicit and to provide such information as it deems necessary and appropriate for purposes of credit investigation whether such information shall pertain to the company, its principals or its officers and to share such information with its affiliates provided that the information shall be kept in the same confidence as if it had not been shared.*

|                    |  |               |              |
|--------------------|--|---------------|--------------|
| <b>Print Name:</b> |  | <b>Title:</b> |              |
| <b>Signature:</b>  |  |               | <b>Date:</b> |
| <b>Print Name:</b> |  | <b>Title:</b> |              |
| <b>Signature:</b>  |  |               | <b>Date:</b> |
| <b>Print Name:</b> |  | <b>Title:</b> |              |
| <b>Signature:</b>  |  |               | <b>Date:</b> |