

J D Factors Corporation 315 Matheson Blvd East Mississauga, Ontario L4Z 1X8 P: 800.263.0664

F: 800.939.2305

APPLICATION TO ENTER INTO A SECURITY AGREEMENT WITH J D FACTORS

Busine	ess Name:							
Trade	Names/DBA:			Phone	:			
Туре о	of Industry:							
Addres	ss:				:			
City, P					te Established:			
			:		lotor Carrier #:			
СОМР	ANY PRINCIPALS							
1.	Name:			Driver	's License #:			
	Name:							
	Home Address					Own	Rent	
	City, Province,	PC:			-			
	City, Province, PC: SIN #:				DOB:			
2.	Name:			Driver	's License #:			
	Title:				wnership %:			
	Home Address					Own	Rent	
	City, Province	PC:						
	Phone #:		SIN #:		DOB:			
3.	Name:			Driver	's License #:			
	Title:			Company O	wnership %:			
	Home Address					Own	Rent	
	City, Province,	PC:						
	Phone #:		SIN #:		DOB:			
ACCOL	UNTS RECEIVABLE							
Receiv	ables Now Open:		Me	onthly Factoring Volu	ıme:			
Numbe	er of Active Custom	ers: Re	eceivables Pledged?	Yes No	Terms of Sale:			
Have y	ou Factored Before	? Yes	No If YES, Factor a	and Dates:				
SUPPC	ORT INFORMATION							
Insurance Agency:			Contact:		Phone:			
	ss (City, Prov, PC):							
Busine	ess Space:	Own Lease	If leased, period of	current lease:				
Landlord and/or Management Company:					Phone:			
Address (City, Prov, PC):			Monthly Rent:					

BANKING & TAX INFORMATION					
Business Bank:			t Opened:		
Address (City, Prov, PC):			Phone:		
Account Number:					
Do you have any other business bank acco		Yes	No		
f Yes, please list:					
Number of Employees:	Revenue Canada ID #:	evenue Canada ID #:		Yes	No
Employment Payroll Taxes Filed:	Weekly Monthly	Quarterly	Annually		
NCB/WSIB Compliant? Yes	No Number:		Tax Lien(s) Filed?	Yes	No
SIGNATURES					
/We have been told and do understand the		on for financing	with J D Factors does not gua	rantee that	
D Factors will factor or provide any finan	ncial services whatsoever.				
/We further have been told and do under	rstand that approval to factor ma	come only after	r the Manager of J D Factors a	approves this	S
application, and the accounts/invoices off	fered are approved in accordance	with the terms o	f J D Factors Security Agreem	ent.	
/We hereby affirm that the above statem	nents are true and accurate to the	best of my/our k	knowledge and belief. This se	rves as my/o	ur
permission for the release of any informat	tion regarding this application to	D Factors for the	e purpose of credit investigat	ion.	
The undersigned also hereby consent(s) to	o J D Factors collecting personal c	edit information	, including personal credit re	port(s).	
, , ,			,	. ,	
Principal 1	Principal 2		Principal 3		
			•		
				_	
Print Name	Print Name		Print Name		
Title	Title		Title	_	
E-Mail Address (for e-Documents)	E-Mail Address		E-Mail Address		
E man / waress (for a Boodiments)	2 Wall / Radi ess		2 Man Address		
Date	Date				
			Date		
			Date		

