

BUSINESS CREDIT APPLICATION

DEALER TO COMPLETE	Dealer Number	Dealer Name	Year	Make	Model Code

PLEASE PRINT

Name of Company/Firm							
Current Address	Number and Street	Apt. Number	City	Province/Territory	Postal Code	Business Phone Number	Number of Years
Previous Address (if less than 3 years at Current Address)							Number of Years
Nature of Business							Years in Business
Please check one of the following				<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	Jurisdiction of Incorporation	Date of Incorporation
Name and Address of Parent Corporation	Number and Street	Unit Number	City	Province/Territory	Postal Code	Business Phone Number	
Contact Name			Email Address				

Officers and Principals

Full Legal Name	Home Address Number and Street	Apt. Number	City	Province/Territory	Postal Code	Home Phone Number	Title	Check if Authorized to Borrow <input type="checkbox"/>
Full Legal Name	Home Address Number and Street	Apt. Number	City	Province/Territory	Postal Code	Home Phone Number	Title	Check if Authorized to Borrow <input type="checkbox"/>

Banking Information

Name of Institution	Branch	Contact Name	Phone Number	Account Number	Type of Account	Date Opened
Name of Institution	Branch	Contact Name	Phone Number	Account Number	Type of Account	Date Opened

Creditors

Name	Address	Number and Street	City	Province/Territory	Postal Code	Phone Number
Name	Address	Number and Street	City	Province/Territory	Postal Code	Phone Number

Principal Driver

Principal Driver's Name	Principal Driver's Licence Number	
Driver's Identity verification is required. Choose one preferred method: <input type="checkbox"/> Photocopy of driver's licence OR <input type="checkbox"/> Complete Identification and Verification Section		_____ (initial here)

I have read and agree to the **Personal Information Consent** (next page). I represent and warrant that all information provided in this application is true, correct and complete. It is the express wish of the parties that this form and any related documents be drawn up and executed in English. Les parties ont expressément exigé que le présent formulaire et tous les documents s'y rattachant soient rédigés en anglais.

Authorized Signatory of Business Applicant Name and Title (Please Print) Date

Authorized Signatory of Business Applicant Name and Title (Please Print) Date

PERSONAL INFORMATION CONSENT: I consent to the collection of the information in this credit application and information about me from third parties. I understand that third parties can include credit/consumer reporting agencies, financial and credit granting institutions I deal with (such as banks, credit unions, investment managers, lenders and credit card providers), and, if any, my employer, landlord and personal references. I understand that Honda Canada Finance Inc. (HCFI), Honda Canada Inc. (Honda), and their affiliates, dealers and service providers may collect, maintain, use, disclose, combine and otherwise process my personal information and will share this information between themselves for purposes that may include (if applicable to me): (i) processing my credit application, including verifying information and evaluating credit worthiness; (ii) completing entering into and performing my purchase, finance or lease transaction, including lien and title registrations and insurance related activities; (iii) contract management and administration, including responding to customer inquiries, ongoing evaluation of credit, debt collection and vehicle recovery, and maintaining records for legal and accounting purposes; (iv) maintaining my warranty and customer service records and conducting recall campaigns; (v) fraud detection and prevention; (vi) conducting market research and customer service campaigns; (vii) providing me with marketing information; (viii) other applicable purposes described in the HCFI Privacy Policy or the Honda Privacy Policy (www.honda.ca/privacy), as applicable; and (ix) other purposes required or permitted by law. In some cases, such as credit checks, third parties will learn that I have applied for or been approved for credit and I understand that this may affect my credit with those third parties.

I can contact HCFI at 1-800-387-5399 or address my request in writing to 180 Honda Boulevard, Markham, Ontario, L6C 0H9 or to 1750, Eiffel Street, Boucherville, Quebec, J4B 7W1 if I wish to withdraw consent to the purposes specified above or to update or correct my personal information. Except for a withdrawal of consent to the purposes in sections (vi) and (vii) above, I understand that HCFI may be entitled to terminate their relationship with me if I withdraw consent to the other purposes specified in this Personal Information Consent. In some cases, personal information may be disclosed, processed and stored outside Canada, and therefore may be available to government authorities under lawful orders and laws applicable there.

My consent in this credit application does not amend or revoke any other consents I may have previously given to HCFI and Honda or their affiliates, dealers and service providers or that I provide to them in the future.

Driver's Licence: HCFI will restrict the use of the principal driver's licence number (if collected) to: (i) obtain from the applicable Ministry of Transportation confirmation of the vehicle's registration; (ii) confirm that the driver has a valid driver's licence; (iii) verify the identity of the driver in conformity with HCFI's regulatory and contractual obligations; and (iv) enforce HCFI's legal rights, including with respect to debt collection.

Credit/Consumer Reports: HCFI relies upon credit/consumer reports from Equifax Canada and/or Transunion Canada. You have the right to request that this (these) agencies disclose your account history to you and to request that this (these) credit reporting agency(ies) correct any information that is inaccurate in your credit bureau file. Equifax Canada can be reached at: North American Centre, 5700 Yonge St, North York, ON M2M 4G8, (416) 227-8500 or 7100 Rue Jean-Talon E #801, Anjou, QC H1M 0A3 (514) 493-2470. Transunion Canada can be reached at P.O. Box 338, LCD1 Hamilton, ON L8L 7W2, 1-800-663-9980 or CP 1433 Succ. St-Martin, Laval, QC H7V 3P7 1-877-713-3393.

**DEALER
TO COMPLETE**

DEALER CONFIRMATION OF IDENTIFICATION

By signing this section, the Dealer Representative confirms that the identity of the individual(s) who submitted the Application has been verified and in addition, confirms the following:

- that the photo of the individual(s) on the identification document(s) reviewed is that of the applicant/co-applicant(s)
- that the name on the identification document(s) reviewed matches the name(s) on the credit application(s)
- that the date of birth on the identification document(s) reviewed matches the date(s) of birth on the credit application(s)
- Dealer Representative has reviewed all pieces of identification provided and the signatures match those on the credit application
- that the identification document(s) reviewed are current and not expired.

**EACH IDENTIFICATION DOCUMENT MUST BE ORIGINAL, VALID AND NOT EXPIRED AND CONTAIN ALL OF THE REQUIRED INFORMATION.
DO NOT ATTACH IDENTIFICATION IF APPLICANT/CO-APPLICANT CHOOSES TO COMPLETE THE IDENTIFICATION AND VERIFICATION FORM.**

Dealer Representative Name:

Dealer Representative Signature:

IDENTIFICATION AND VERIFICATION SECTION

Driver's Licence Information			
First Name	Middle Name(s)	Surname	
Address	City	Province/Territory	Postal Code
Type of Identification	Place of Issue (if applicable)	Expiry Date (if applicable)	Date of Birth (DD/MM/YYYY) (as indicated on Identification Document)