

Consumer Financing, Transit 1700-1, Fax: 1-888-663-1578
 500 Place d'Armes, 16th Floor, Montreal, Quebec H2Y 2W3

 Date:
DD MM YYYY
Mandatory sections to be completed by the Professional or Merchant: Section 1 (depending on the type of product or service financed) and Sections 2, 4 and 8
Mandatory sections to be completed by the Broker: Sections 3, 5, 6 and 7

SECTION 1
Reserved for Other Products and Dental Care. To be completed by the Professional or Merchant (mandatory).

N.B.: For dental care, include an estimate of the goods and services involved when sending the credit application.

\$ Amount requested	Term	Rate subject to change			Promotion (if applicable):	Length of promotion
Fixed rate	Variable rate	Rate	Period	Term	Tick the type of promotion:	<input type="checkbox"/> Interest-free period or
Payment frequency:	<input type="checkbox"/> Weekly*	<input type="checkbox"/> Every two weeks*	<input type="checkbox"/> Monthly*		<input type="checkbox"/> Rate reduction of	_____ %
	* If the type of financing allows it.					

Reserved for Motorized Products. To be completed by the Merchant (mandatory).

Type of product	\$ Purchase price	Merchant
Make/Year	\$ Less cash payment	Rate and term
Model	\$ Less trade-in value	Amortization
	\$ Plus balance on trade-in	\$ Amount financed
Payment frequency:	<input type="checkbox"/> Weekly*	<input type="checkbox"/> Every two weeks*
	* If the type of financing allows it.	
	<input type="checkbox"/> Monthly*	

SECTION 2 - MAIN APPLICANT - To be completed by the Professional or Merchant (mandatory)

<input type="checkbox"/> Ms.	Last name and first name	Date of birth (DD MM YYYY)	S.I.N. (optional)
<input type="checkbox"/> Mr.			
<input type="checkbox"/> Tick if non resident	Telephone No. (home)	Telephone No. (work)	

Verification of identity of main applicant
1. Category A identity document (mandatory) See page 6

<input type="checkbox"/> Driver's licence	<input type="checkbox"/> Passport	<input type="checkbox"/> Other:
No. of identity document	Expiry date of identity document (DD MM YYYY)	Place of issue

2. Category A or B identity document See page 6

<input type="checkbox"/> Driver's licence	<input type="checkbox"/> Passport	<input type="checkbox"/> Other:
No. of identity document	Expiry date of identity document (DD MM YYYY)	Place of issue

SECTION 3 - MAIN APPLICANT - To be completed by the Broker (mandatory)

<input type="checkbox"/> Owner	Since	Address (No., Street, City, Province, Postal Code)
<input type="checkbox"/> Tenant		

If at this address for less than 2 years

<input type="checkbox"/> Owner	Duration	Previous Address (No., Street, City, Province, Postal Code)
<input type="checkbox"/> Tenant		

Name of employer (If self-employed, specify type of work)	Address (No., Street, City, Province, Postal Code)
Type of employment: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Part-time	

Occupation	No. of years	\$ Gross annual salary
Specify if other employment income (occupation)	No. of years	\$ Gross annual salary

If less than 2 years with current employer

Name of previous employer (If self-employed, specify type of work)	No. of years	Occupation
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SECTION 4 - CO-APPLICANT - To be completed by the Professional or Merchant (mandatory)

Ms. _____
 Mr. Last name and first name _____ Date of birth (DD MM YYYY) _____ S.I.N. (optional) _____

Tick if non resident Telephone No. (home) _____ Telephone No. (work) _____

Verification of co-applicant's identity**1. Category A identity document (mandatory)**

Driver's licence Passport Provincial health insurance card (if permitted by law) Other: _____

 No. of identity document _____ Expiry date of identity document (DD MM YYYY) _____ Place of issue _____

2. Category A or B identity document

Driver's licence Passport Provincial health insurance card (if permitted by law) Other: _____

 No. of identity document _____ Expiry date of identity document (DD MM YYYY) _____ Place of issue _____

SECTION 5 - CO-APPLICANT - To be completed by the Broker (mandatory)

Owner _____
 Tenant Since _____ Address (No., Street, City, Province, Postal Code) _____

If at this address for less than 2 years

Owner _____
 Tenant Duration _____ Previous Address (No., Street, City, Province, Postal Code) _____

 Name of employer (If self-employed, specify type of work) _____ Address (No., Street, City, Province, Postal Code) _____

Type of employment: Permanent Temporary Part-time

Occupation _____	No. of years _____	\$ _____ Gross annual salary
Specify if other employment income (occupation) _____	No. of years _____	\$ _____ Gross annual salary

If less than 2 years with current employer

 Name of previous employer (If self-employed, specify type of work) _____ No. of years _____ Occupation _____

SECTION 6 - BALANCE SHEET - To be completed by the Broker (mandatory)

ASSETS	VALUE	LIABILITIES	BALANCE	MONTHLY PAYMENTS
	\$		\$	\$
Type of main residence _____	\$ _____	Name of mortgage creditor _____	\$ _____	\$ _____
Car (year, make, model) _____	\$ _____	Credit cards _____	\$ _____	\$ _____
Savings, GICs, etc. _____	\$ _____	Lines of credit _____	\$ _____	\$ _____
Other assets _____	\$ _____	Other loans _____	\$ _____	\$ _____
		Monthly rent/condo fees (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ _____	TOTAL	\$ _____	\$ _____

SECTION 7 - IDENTIFICATION OF THIRD PARTY - To be completed by the Broker (mandatory)

Has the loan been contracted on behalf of or per the instructions of a third party? No Yes. If so, complete the following:

Ms. _____
 Mr. Last name and first name _____ Company name _____
 (Incorporation No. or registration No. and place of issue of certificate of incorporation, if applicable) _____

 Address (No., Street, City, Province, Postal Code) _____

 Occupation/Nature of business _____ Relationship to Applicant/Co-Applicant _____ Date of birth of third party (DD MM YYYY) _____

SECTION 8 - AUTHORIZATION AND CONSENT - To be completed by the Professional or Merchant (mandatory)

CREDIT APPLICATION

I, the undersigned, hereby request financing (the "Loan") from National Bank of Canada (the "Bank"). I acknowledge that the granting of the Loan is conditional on credit approval by the Bank, at its sole discretion. I certify that all the information provided is accurate and that I do not have any other creditors than those declared. I acknowledge that this information may influence the Bank's credit decision. I further acknowledge that the Bank may, at any time, cancel any loan that it may have granted me, should the information prove to be inaccurate.

GENERAL CONDITIONS

I acknowledge that I have read the General Terms and Conditions after the signature section and agree to comply with them.

CONSENT REGARDING PERSONAL INFORMATION

I acknowledge that by signing this form, I also give my consent and authorization with respect to my personal information effective immediately and for the duration of my business relationship with the Bank and Professional or Merchant, as applicable, or for a longer period of time if required or permitted by law, subject to my right to restrict the use and disclosure of such information, as set out below. If I have provided personal information on a third party, I confirm that the third party authorized me to do so and consents to the collection, use and disclosure of personal information in accordance with the provisions hereof. Should I have any privacy questions, I may contact branch personnel or the Bank's Privacy Officer by e-mail at confidentiality@nbc.ca or by any other means mentioned in the Bank's Privacy Policy. **Moreover, I expressly authorize the Bank to conduct, at any time, a routine investigation on my solvency or my creditworthiness with any credit reporting and assessment agency ("Credit Agency") and to request, obtain and provide any information to any such agency for this purpose.**

SIGNATURE(S)

Date (DD MM YYYY)

Main applicant

Co-applicant (if applicable)

AUTHORIZATION FOR PRE-AUTHORIZED DEBITS

I authorize the Bank to debit from the account indicated below the periodic payments as they become due and the administration fees for the Loan to be used for personal purposes. **I waive my right to receive a notice indicating the amount to be debited from the account and the date(s) of the debit(s) 10 days before the scheduled date of the first pre-authorized debit (PAD).**

I ATTACH A VOID CHEQUE.

Name of institution

Account No.

Transit

This authorization may be revoked at any time with 30 days' written notice. To obtain a sample cancellation form or further information on the right to cancel a PAD, I can: (i) contact the Bank at 1-888-483-5628 (514-394-5555 in Montreal), or by e-mail at telnat@nbc.ca, (ii) go to my branch or (iii) visit www.cdnpay.ca.

If a debit does not comply with this authorization, certain recourse rights are available. For example, any debit that is not authorized or is not consistent with this authorization may be refunded. For more information on recourse rights, I can contact the Bank as indicated above or visit www.cdnpay.ca.

Disclosure of the cost of borrowing in the case of more than one Applicant

Each of the Applicants is hereby informed of his or her right to individually receive all the documents constituting disclosure of the cost of borrowing pursuant to the *Bank Act*, including statements of account and different notices (the "regulatory information"). Each of the Applicants acknowledges having read the provisions in the General Terms and Conditions section and that by signing this form, they confirm the election made hereinunder.

Option 1. Separate disclosure

If Option 2 is not ticked, each of the Applicants wishes to receive the regulatory information.

OR

Option 2. Single disclosure (tick if applicable)

Each of the Applicants requests that the Bank send one copy of the regulatory information to only one Applicant, i.e., the main Applicant.

SIGNATURE(S)

Date (DD MM YYYY)

Main applicant

Co-applicant (if applicable)

By signing, the Professional or Merchant, as applicable, confirms (i) having collected all the information required by the Bank for sections 1, 2, 4 and 8; (ii) having duly identified the main Applicant and Co-applicant; (iii) having witnessed their signature; (iv) having sent the application to the Broker so the latter can complete sections 3, 5, 6 and 7. The Broker confirms having collected the information verbally from the main Applicant and Co-applicant, if applicable.

Date (DD MM YYYY)

Mandatory signature of the Professional or Merchant or the Professional's or Merchant's duly authorized representative

251 Fanshawe Park Rd W London, ON N6G 0E1

Address of Professional (No., Street, City, Province, Postal Code)

Paliani Dentistry

Name of Professional or Merchant

519-434-2331

Telephone No.

519-434-7131

Fax No.

Date (DD MM YYYY)

Mandatory Signature of the Broker or the Broker's duly authorized representative

Last and first name of duly authorized Broker

GENERAL TERMS AND CONDITIONS

For the purposes hereof, the term "Bank" designates National Bank of Canada, its successors and assigns.

The term "I" designates individually and collectively each of the Applicants applying for a credit product and the person who will benefit from the product or service to be financed, if applicable. The terms "Professional" or "Merchant" designate the health professional or the merchant, as well as the Professional's or Merchant's successors and assigns, who wish to make a financing program available to their clients in the context of granting products or services. The term "Broker" designates a financing intermediary and its successors and assigns.

Prepayment

I may, at any time prior to expiry and without penalty, pay the balance owing on the Loan, in full or in part.

Interest rate

Fixed rate and rate subject to change: I understand that the fixed rate or the rate subject to change indicated on page 1 is guaranteed for a period of 90 days as of the date of signature of this application.

Variable rate: I understand that the variable rate indicated on page 1 is that in effect on the date of this application and that it is provided for information purposes only.

Collection, use and disclosure of personal information

Collection

The Bank and the Professional or Merchant, on their own or through the Broker, collect personal information about me, including my contact information and data related to my identity or finances, in order to offer me the regular financial services for credit products and the related insurance products, by telephone or any technological or electronic device, as applicable, to understand and meet my needs, to determine my eligibility for various Bank products and services, and to protect my interests and those of the Bank and of the Professional, the Merchant or the Broker.

I agree to provide the Bank and the Professional, the Merchant or the Broker with the necessary information about me for the purposes mentioned herein, and I authorize them to obtain personal information about me from any person likely to have it or confirm its accuracy (credit agencies, financial institutions, registry offices, regulatory authorities and agencies, employers, professionals and individuals given as reference). **I also authorize the Bank, the Professional, the Merchant and the Broker to exchange personal information about me for the purposes mentioned herein, particularly information concerning the Bank's decision regarding my credit application. If my application is declined, the Bank may communicate the reasons for this decision to the Professional, Merchant or Broker and, for example, disclose certain elements of my credit history.**

Use and Disclosure

1. The personal information obtained by the Bank and the Professional, the Merchant or the Broker in order to provide me with the products and services requested may be used and disclosed to the persons and entities indicated in the previous paragraph, to any person or entity who works with or for them, including their suppliers, attorneys or agents, as well as any other third party, as permitted by law, for the following purposes:
 - 1.1 To determine my financial situation and my eligibility for the various products and services requested, and to check the authenticity of the information provided;
 - 1.2 To provide me, on an ongoing basis, with the various financial products and services requested;
 - 1.3 To process and store data, recover amounts and monitor transactions in order to protect me, as well as the Bank, against errors and fraud;
 - 1.4 To enable the Bank to compile data for statistical purposes, to assess the quality of its customer service and, in general, to conduct its activities and ensure their compliance, thereby authorizing the Bank to record and monitor telephone conversations and other exchanges with me (e-mail, Internet, etc.);
 - 1.5 To enable the Bank to adopt measures required and exchange with its subsidiaries and affiliated companies¹ the information necessary to manage risk and update my profile, as well as to comply with applicable legislation, particularly the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act*;

¹ The subsidiaries and affiliated companies of the Bank are those that offer to the public in Canada deposit and lending services, credit, debit and payment card services as well as trust, custodial, brokerage, insurance and other personal financial services. A list of the main Canadian subsidiaries is available at www.nbc.ca and in branches.

- 1.6 To make it easier for the Bank and the Professional, the Merchant or the Broker, as well as the credit reporting agencies, financial institutions, registry offices, regulatory authorities, employers, professionals and individuals given as references, to identify me and distinguish me from other clients. I authorize the Bank and the Professional, the Merchant or the Broker to use my Social Insurance Number for these specific purposes, unless I declined to disclose it when completing this application form;
 - 1.7 To enable interested persons or companies to carry out due diligence audits in the event of the sale, assignment or transfer of the activities or assets of the Bank, Professional, Merchant or Broker to allow the conclusion of any transaction in this regard;
 - 1.8 To convey my credit file to credit agencies, credit product insurers or other lenders in order to preserve the integrity of the credit granting process, as applicable;
 - 1.9 In other cases and under conditions where permitted by law, to use and exchange personal information without my consent.
2. Some of my personal information, such as my name, address, telephone numbers and e-mail addresses (that I have provided to the Bank, the Professional or Merchant or the Broker) and other information of a financial nature, may also be used and disclosed by the Bank for the following purposes:
- 2.1 To offer me, via telemarketing or other methods, other products and services offered by the Bank, its subsidiaries and affiliates. Such information will also be added to the client lists the Bank draws up and uses for this purpose; and
 - 2.2 To enable the Bank to disclose such information to its subsidiaries and affiliates (where legislation permits) so that they can offer their products and services to me, via telemarketing or other methods.

I expressly authorize the Bank and, if applicable, the Professional, the Merchant or the Broker, to use and disclose the information for the purposes stated above. I acknowledge that I may, at any time, prohibit the Bank from using and disclosing the information for the purposes mentioned in paragraph 2, subject to reasonable notice. I must then notify the Bank to this effect by calling Customer Service at **1-888-483-5628** (toll free) or **514-394-5555** in the Montreal area, by sending an e-mail to telnat@nbc.ca, or by going to one of the Bank's branches. The product or service requested will not be refused solely because I withhold my consent to my information being used or disclosed for such purposes. In all cases, I will be notified of the consequences of my refusal to allow the Bank to use and disclose the personal information about me, particularly the fact that I will no longer receive information on the products and services likely to be of interest to me. I acknowledge that my decision will not prevent the Bank from sending me regulatory inserts, printing messages on an account statement or ATM statement, posting messages on a transactional site or webpage, or directly communicating to me any information on its products and services.

Retention, access and correction

I authorize the Bank and the Professional or Merchant, as applicable, to keep the information collected for the purposes stated above for as long as needed, even if I am no longer their client. I acknowledge that I can also have access to my personal information and correct it, if needed, by sending a request to this effect, either to my branch or by e-mail to confidentiality@nbc.ca, or by calling the Professional or Merchant. In addition, I will advise the Bank promptly of any changes related to my personal information so it may update its files. The Bank is authorized to act on the basis of the information it holds pertaining to me until such time as it is notified of a change to said information. If I fail to advise the Bank of such changes, I cannot hold the Bank liable for any damages I may incur as a result of inaccurate information pertaining to me the Bank holds, uses and discloses.

Disclosure of the cost of borrowing in the case of more than one Applicant

1. General terms and conditions

Option 1. Separate disclosure

If Option 1 is selected, each of the Applicants will receive the regulatory information.

Consequence of separate disclosure – Even if the Applicants reside at the same mailing address, each Applicant will receive the documents containing regulatory information under separate cover, including statements of account, if applicable.

Revocable election – The Applicants may revoke this election at any time such that regulatory information is sent to a single Applicant designated for such purpose. However, all the Applicants must visit a National Bank branch to give their consent to such revocation.

Option 2. Single disclosure

If Option 2 is selected, only one copy of the regulatory information will be given to one Applicant, i.e., the main Applicant, using documents made out to all the Applicants.

Consequence of single disclosure – Only one copy of the documents containing regulatory information will be sent to only one Applicant, including statements of account, if applicable.

Revocable election – Each of the Applicants may revoke this election at any time by calling TELNAT at 1-888-4TELNAT (toll-free) or 514-394-5555 in the Montreal area. When any one Applicant exercises his or her right to receive the regulatory information separately, all the Applicants will receive such information individually until the end of the loan.

2. Election applicable to renewal

The election made by the Applicants and any revocation of this election will continue to apply to any renewal of the loan agreement. Accordingly, all notices of renewal or non-renewal will only be sent to the main Applicant if Option 2 – Single disclosure has been selected.



DOCUMENTS ACCEPTED FOR IDENTIFICATION PURPOSES BY NATIONAL BANK

(One document must come from Category A)

Category A

- Birth certificate issued in Canada
- Driver's licence issued in Canada
- Provincial or territorial health insurance card, **except** for those issued in Ontario, Prince Edward Island and Manitoba (these provinces do not allow the card to be used for identification purposes)
- Canadian passport
- Social insurance card issued by the Government of Canada
- Canadian citizenship certificate
- Certificate of naturalization in the form of a document or a card (excluding a commemorative document)
- IMM 1442 form issued by Citizenship and Immigration Canada (CIC)
- IMM 1000 form issued by CIC (for permanent residents prior to June 28, 2002)
- Permanent resident card or IMM 5292 (confirmation of permanent residence from CIC)
- Certificate of Indian Status issued by the Government of Canada
- Old Age Security card issued by the Government of Canada
- Identity card or document issued by one of the following authorities and bearing the photo and signature of the *individual* being identified:
 - Insurance Corporation of British Columbia
 - Alberta Registries
 - Saskatchewan Government Insurance
 - Department of Service of Nova Scotia and Municipal Relations
 - Department of Transportation and Public Works of the province of Prince Edward Island
 - Service New Brunswick
 - Department of Government Services and Lands of the province of Newfoundland and Labrador
 - Government of the Northwest Territories Department of Transportation
 - Department of Community Government and Transportation of the territory of Nunavut

Category B

- Passport from a foreign country
- Employee identity card issued by an employer recognized in the community and bearing the photo of the *individual* being identified
- Client Card from the Canadian National Institute for the Blind bearing the photo and *signature* of the *individual* being identified
- Client card or ABM card issued by a member institution of the Canadian Payments Association in the individual's name or bearing the name and *signature* of the *individual* being identified
- Visa or MasterCard credit card issued by an organization or *business* well known in Canada in the person's name or bearing the name and *signature* of the *individual* being identified

N.B. : When checking the identity of a person, any documents presented must be valid **originals**, not copies