



STATEMENT OF PERSONAL ASSETS AND LIABILITIES

FULL NAME _____ DOB _____ SIN (Optional) _____

RELATIONSHIP TO APPLICANT (Spouse/Shareholder/Guarantor) _____

ADDRESS _____ OWN ____ RENT ____ SINCE _____

TELEPHONE RES. _____ BUS. _____ E-MAIL _____

PREVIOUS ADDRESS (if less than 3 yrs. at above address) _____

MARRIED ____ SINGLE ____ SEPARATED ____ DIVORCED ____ # DEPENDENTS _____

EMPLOYER _____ POSITION _____ SALARY _____ #YRS _____

EMPLOYER'S ADDRESS _____ PHONE _____

OTHER INCOME _____ SOURCE(S) _____

REAL ESTATE

Address and Legal Description	Year Purchased	Price Paid	Mortgages Outstanding	Estimated Current Value

STATEMENT OF NET WORTH

ASSETS	VALUE	LIABILITIES		
			Amount	Monthly Payment
Real Estate 1.				
2.		Loans		
3.				
Bank Account		Mortgages		
Investments				
RRSP's				
Automotive Equipment: year/make		Credit Cards		
Recreation Equipment				
Equity in Business		Other Liabilities		
Other Assets		NET WORTH		\$
TOTALS	\$		\$	\$

BANK(S) OR CREDIT UNION(S) DEALT WITH _____

DISCLOSURE AND RELEASE STATEMENT

To: The Grenville Community Futures Development Corporation (the "Corporation")

- 1. I, hereby certify that the information in this Statement of Personal Assets and Liabilities is a complete and true declaration. The property values shown above are the fair market values of the properties and the amount of debts is the total potential indebtedness (inclusive of any other loans, credit cards, or other debts for which I have signed as a guarantor).
- 2. I confirm that if any statement I have made herein or in accompanying materials proves to be incorrect in any way, I shall notify the Corporation immediately.
- 3. I authorize the Corporation to obtain personal credit information about me from any source. By executing this statement, I acknowledge as notice in writing, the Corporation's intent to obtain this information and I authorize each source to provide this information to the Corporation.
- 4. I understand and agree that in order to perform a credit investigation, I need not provide my Social Insurance Number ("SIN") if I can provide alternative identification that is acceptable to the credit reporting agencies. If I do provide my SIN, I consent to the Corporation using this information for the limited purpose of performing a credit investigation.
- 5. I authorize the Corporation to retain this Statement of Personal Assets and Liabilities and any financial records, credit and reference reports for the Corporation's records and reporting to Industry Canada who oversees the Community Futures Program.
- 6. I confirm receipt of the Corporation's *Privacy Statement* and understand and consent to the Corporation collecting, using, retaining and disclosing the information contained in this Statement of Assets and Liabilities for the limited purpose of determining my eligibility for financing as is required by law, and by Industry Canada. I understand that the Corporation will handle my personal information in strict confidence in accordance with Federal privacy law as set out in the Corporation's *Privacy Policy*. If I have any questions or concerns about the management of my information, I may refer to the *Privacy Policy*, available at www.grenvillecfdc.com or contact the Chief Privacy Officer.

Yes or No

I am currently the subject of litigation before a court, tribunal, government board or agency, or there is a threat of such litigation. There are unexecuted judgment(s) registered against me, such as:

I have made an assignment or have been petitioned into bankruptcy; there are writs registered against my name. If yes, provide details: _____

I certify that I am a Canadian Citizen or Landed Immigrant.

DATED AT _____ THIS _____ DAY OF _____, 200_____

Witness

Signature