DAIMLER TRUCK
Financial Services

COMMERCIAL PURCHASER/LESSEE STATEMENT

Date: _____

Customer Name		Dealer Name	
Address		Address	
City & Province		City & Province	
Phone Number		Phone Number	
Email			

Customer Background

Corporation ☐ Partnership ☐ Trust ☐ Other _____ Years in Business _____

For the entity type selected, list *all* individuals required below:

- **Corporation**: the names of all directors of the corporation and the names and addresses of all persons who directly or indirectly own or control 25% or more of the shares of the corporation
- **Trust**: the names and addresses of all trustees and all known beneficiaries and settlors of the trust
- **Widely Held or Publicly Traded Trust:** the names of all trustees of the trust and the names and addresses of all persons who directly or indirectly own or control 25% or more of the units of the trust
- **Other entity types:** the names and addresses of all persons who directly or indirectly own or control 25% or more of the entity

Name	Title	Ownership %	Years with Company	Years Experience

Name	Address	City	Province	Postal Code

Daimler Truck Financial Services Canada Corporation
202-2680 Matheson Blvd E Mississauga ON L4W 0A5
1-800-361-4680
www.daimler-truckfinancial.ca

Revenue Details

Traffic Lanes & Type of Freight	Revenue Distribution (Top 5 Customers)	Annual Revenue	% of Revenue
	1.	$	%
	2.	$	%
	3.	$	%
	4.	$	%
	5.	$	%

Assets

	Units Financed	Units Leased (capitalized)	Units Leased (operating)	Units Owned (F&C)*	Total Units
Power Unit Distribution					
Trailer Distribution					
Provide equipment listing, if available			Number of owner-operators utilized		

Insurance

Physical Damage Deductibles		Liability Limits	

Bank References

Bank Name	Name of Contact	Phone Number	City, Province	Account Number

Equipment Financing and Leasing References**

Bank or Finance Company Name	Name of Contact	Phone Number	City, Province	Account Number

**F&C - Free & Clear*
***This information should correspond with the information contained in the attached*

Legal Actions

Prior Bankruptcy ☐ Yes ☐ No Judgments ☐ Yes ☐ No Law Suit Pending ☐ Yes ☐ No

I acknowledge and agree that, upon receipt of a duly signed copy of this commercial purchaser/lessee statement ("Statement"), Daimler Truck Financial Services Canada Corporation, ("DTFS") and the Dealer shall be entitled and authorized to establish a file on me containing personal information.

The object of the file shall be to allow DTFS and its worldwide affiliates and assignees (1) to evaluate my credit and solvency; (2) to make a decision with regard to the Statement and the possible execution of an agreement, including a contract for lease or financing of a purchase of a motor vehicle; (3) to monitor, record and determine during the term of such a contract my compliance with all or part of the obligations contained therein; (4) to answer any questions I might have with respect to the Statement, any contract I may enter into and the file in general; (5) to record, manage, evaluate and collect, if applicable, any amount owing by me to DTFS; (6) to develop and implement customer programs including communicating with me by providing me with materials such as offers, updates and information which may be of interest to me; (7) to maintain and use the information as a credit history; and (8) to meet legal and regulatory requirements.

To achieve the object of the file, I understand that the personal information contained in my file shall be made available only to the employees, representatives and agents of DTFS and its worldwide affiliates and assignees who require it in the course of the performance of their duties or mandates. The personal information in my file will be used to make any relevant decisions in order to achieve the object of the file.

The file relating to me shall be kept at the DTFS office (the address of which can be supplied by the Dealer). DTFS shall inform me in writing if my file is moved to a new location. I understand that I shall have the right: (1) to obtain access to the personal information in my file and (2) to rectify any personal information in my file which is inaccurate, incomplete, ambiguous or out- of-date. I shall be entitled to exercise either one of these rights by addressing a written request for access or rectification to the DTFS office in care of the Access to Information Manager.

I authorize DTFS and the Dealer to collect the necessary personal information concerning me to fulfill the object of the file, from third persons, including credit agencies, information and collection agencies, credit reporting bureaus, financial institutions, insurance companies, insurance brokers, my past, present and future employers, creditors and landlords, motor vehicle dealers, government agencies, my spouse or any other person who has or will have information related to my credit history and

Daimler Truck Financial Services Canada Corporation
202-2680 Matheson Blvd E Mississauga ON L4W 0A5
1-800-361-4680
www.daimler-truckfinancial.ca

my solvency, my whereabouts or the whereabouts or condition of any property that is or has been owned, held or leased by me. I specifically consent to the release and disclosure of personal information by such persons to DTFS and the Dealer.

If I request credit life or disability insurance, I expressly authorize any doctor, physician, a member of a professional corporation in the health sector, health establishment, clinic, hospital or medical information office or a health information custodian to disclose, release and communicate to DTFS personal information, including personal health information, concerning me and expressly authorize DTFS to disclose personal information to them.

I expressly authorize DTFS and the Dealer to disclose personal information concerning me to each other, to any of their worldwide affiliates and assignees, to other third persons including advertising and marketing agencies dealing with DTFS for the development and implementation of customer programs, to credit agencies, to information and collection agencies, to credit reporting bureaus, to financial institutions, to insurance companies, to insurance brokers, to vehicle manufacturers, to motor vehicle dealers, to auction houses, to my creditors, to persons to whom I have applied for credit, to assignees and agents of such third parties, and to any other person to whom DTFS or the Dealer deem it necessary to further my interest or to fulfill the object of the file.

I specifically consent to the use by DTFS of my Social Insurance Number, if supplied, for the purpose of recording, identifying and retrieving my personal information. Supplying my Social Insurance Number helps DTFS distinguish me from others with similar information and accelerates the process of achieving the objects of the file.

I have read the Statement and the Consent respecting the collection, use, release, disclosure, communication and holding of personal information concerning me. I understand the significance and necessity of giving such a consent which is given voluntarily without any coercion and which will be valid for so long as it is needed in order to achieve the object of the file. I acknowledge that the Dealer or its representatives have no authority to waive or modify any question in the Statement, or bind DTFS by making a promise or representation or by giving or receiving information without the written consent of DTF. I acknowledge that DTFS may employ service providers located in the United States in order to fulfill the objects of the file and as a result my information may be processed and stored in that country and that country's courts, governments or law enforcement agencies may obtain disclosure of my information through the laws of that country.

I accept that a photocopy of the Statement and the Consent or a facsimile of same shall be considered as valid as the original.

I confirm that I am not acting on behalf of any third party.

I declare and warrant that the information that I have provided above is true, accurate and complete and that it is not false or misleading in any way. I further declare and warranty that a bankruptcy proceeding is neither presently in progress nor anticipated and acknowledge receiving a copy of this Statement. IN THE EVENT OF ANY MATERIAL ADVERSE CHANGE IN MY FINANCIAL POSITION, I AGREE TO NOTIFY DTFS in writing.

I acknowledge that the Statement and the Consent were drafted in the English language in accordance with my request. Je déclare avoir exigé que cette demande et ce consentement soient rédigés et complétés en langue anglaise.

Please attach year end financial statements for past two years and current prior month end financial statements. Financial statements should include balance sheet, profit and loss statement, and statement of cash flows.

I acknowledge that a consumer/personal report containing credit, medical or personal information will be referred to in connection with the Application. I consent to the preparation of such a report and to DTFS and the Dealer obtaining such a report from credit bureaus/consumer reporting agencies.

SIGNATURE

Name _____ Signature _____ Title _____ Date _____

ONLY FOR DEALER COMPLETION	
Transaction Terms	
Year / Make / Model	
Number of Units	
Selling Price per Unit	$
Total Selling Price	$
Total Down Payment / CCR*	
Term	
Balloon / Residual %	
Unit Distribution	
Number of Adds	
Number of Replacements	
Number of Trades	
Growth in Fleet (%)	
Delivery Dates	
**CCR - Capital Cost Reduction*	

Daimler Truck Financial Services Canada Corporation
202-2680 Matheson Blvd E Mississauga ON L4W 0A5
1-800-361-4680
www.daimler-truckfinancial.ca