Surety
Tel 514.875.0600
Toll Free 800.361.9427
Fax 514.875.0666

Travelers Guarantee Company of Canada
1010 de la Gauchetiere Street West
Suite 1100
Montreal, Quebec H3B 2N2
www.travelersguarantee.com

PERSONAL NET WORTH STATEMENT

GENERAL INFORMATION

Name of Individual: Residence Address:

Phone Number: Cellular: Fax:

Owner : ☐ Tenant: ☐ Since: Y / M / D

Civil Status: Married : ☐ Single: ☐ Common Law Spouse: ☐

Social Insurance Number: / / Date of Birth: y / M / D

Actual Employer: Occupation: Since:

Previous Employer: Occupation: Since:

Name of Spouse: Spouse Gross Income:

Name of Spouse Employer: Occupation:

STATEMENT OF ASSETS AND LIABILITIES AS OF / /

ASSETS		**LIABILITIES**	
Bank Balance:	$	Bank Loans:	$
Term Deposits:		Credit Card:	
Stocks, Bonds:		Line of Credit:	
(Complete Schedule A)		Car Loan:	
Retirement Savings Account:		Income Tax to pay:	
Pension Fund Plan:		Bearing Note:	
Real estate:		Mortgage Loan:	
(Complete Schedule B)			
Other Assets: (describe)		Other Liabilities: (describe)	
Total Assets:	$	**Total Liabilities:**	$
		Personal Net Worth:	**$**

Schedule A) STOCKS & BONDS

Description /Name of Security:	Number of Shares	Due Date Y/ M / D	Purchasing Price	Market Value	If pledged, to whom and for what purpose?

Schedule B) REAL ESTATE: (please include Copy (ies) of Municipal Taxes Statement)

Address and description:	In whose Name	Purchasing Year	Purchasing Price	Municipal Evaluation	Balance of Mortgage	Due Date

ADDITIONAL INFORMATION

	No	Yes	Details
Have you ever failed in Business?	☐	☐ →	
Are there any Lawsuits, Judgments or Liens pending against you?	☐	☐ →	
Are you Endorser for a third Party?	☐	☐ →	
Do you have unpaid Taxes?	☐	☐ →	

The Undersigned hereby declares that the above statements are true and authorizes the Bank and other references to verify the correctness of the statements requested by Travelers Guarantee Company of Canada

Date : / / Signed :