YOUR MORTGAGE BROKER	CUSTOMER FIRST NAME
	CUSTOMER LAST NAME
	CUSTOMER PHONE #
ADDRESS	PLEASE COMPLETE THIS FORM ON ADOBE READER . CLICK HERE TO GET IT FOR FREE NOW.
E-MAIL	

MORTGAGE APPLICATION

Applicants should complete this form as "Applicant 1" or "Applicant 2", as applicable. Applicant 2 information must also be provided (and the appropriate box checked) when a) the income or assets of a person other than the "Applicant 1" (including Applicant 1's spouse) will be used as a basis for loan qualification or b) the income or assets of the Applicant 1's spouse will not be used as a basis for loan qualification, but his or her liabilities must be considered because the Applicant 1 resides in a community property state, the security property is located in a community property state, or the Applicant 1 is relying on other property located in a community property state as a basis for repayment of the mortgage.

MORTGAGE INFO	RMATION			Items marked with * or in red are required.
Mortgage Details				
* Purpose of Loan	☐ Purchase ☐ Refinance	☐ Pre-Approval ☐ Switch		
Mortgage Amount Required	\$		Approx Date Funds Required	(MM/DD/YYYY)
Preferred Mortgage Options				
Please select all that apply	☐ Low rates at origin☐ Access to Credit Lin		☐ Flexible payment plans	☐ Flexible prepayment options

APPLICANT 1 INFORMATION Items marked with * or in red are required. Identification Title * Date of Birth (MM/DD/YYYY) * First Name SIN# * Last Name Home Phone # Initial Work Phone # MobilePhone # E-mail Address **Current Living Address** ☐ Rent Residential Status Own Number \Box Live with parents \Box Other Street Name Monthly Rent Payments Street Type **Street Direction** Unit City/Town Province Postal Code ΥY MM Time at Residence Previous Living Address (If Time at Residence is less than 3 years in current living address) Residential Status Own ☐ Rent Number \Box Live with parents \Box Other Street Name Monthly Rent Payments \$ Street Type Street Direction Unit

NEXT: APPLICANT 1
INFORMATION

City/Town Province Postal Code

Items marked with * or in red are required. Present Employer Occupation Type Number

APPLICANT 1 INFORMATION

Industry Sector		Street Name	
		Street Type	
Name of Employer		Street Direction	
Length of Employment	(YYMM Ex. 3 yrs 2 months = 0302)	Unit	
Years in Line of Business	(YYMM Ex. 3 yrs 2 months = 0302)	City/Town	
		Province	
		Postal Code	
Income			
Type of Income		Other Income Source	
Annual Income	\$	Other Annual Income	\$
Past Employer	(If Length of Employment is less than 3 years at pr	esent employer)	
Occupation Type		Number	
Industry Sector		Street Name	
		Street Type	
Name of Employer		Street Direction	
Length of Employment	(YYMM Ex. 3 yrs 2 months = 0302)	Unit	
Years in Line of Business	(YYMM Ex. 3 yrs 2 months = 0302)	City/Town	
		Province	
		Postal Code	
Income			

Income Type of Income Other Income Source Annual Income \$ Other Annual Income \$

APPLICANT 2 INFO	RMATION			lter	ms marked with * or in red are required.
Identification					
Title			Date of Birth		(MM/DD/YYYY)
First Name			SIN#		
Last Name			Home Phone #		
Initial			Work Phone #		
			Mobile Phone #		
			E-mail Address		
Current Living Address					Same as Applicant 1
Residential Status	Own	□ Rent	Number		
	Live with parents	☐ Other	Street Name		
Monthly Rent Payments			Street Type		
, ,			Street Direction		
			Unit		
			City/Town		
			Province		
			Postal Code		
			Time at Residence	YY	MM
Previous Living Address	S (If Time at Re	sidence is less than 3 ye	ears in current living address)		Same as Applicant 1
Residential Status	□ Own	☐ Rent	Number		
	☐ Live with parents	☐ Other	Street Name		
Monthly Rent Payments	\$		Street Type		
			Street Direction		
			Unit		
			Citv/Town		

Province Postal Code

APPLICANT 2 INF	ORMATION		Items marked with * or in red are required.
Present Employer			
Occupation Type Industry Sector Name of Employer		Number Street Name Street Type Street Direction	
Length of Employment Years in Line of Business	(YYMM Ex. 3 yrs 2 months = 0302)	Unit	
rears in Line of business	(YYMM Ex. 3 yrs 2 months = 0302)	City/Town Province Postal Code	
Income			
Type of Income Annual Income	\$	Other Income Source Other Annual Income	\$
Past Employer	(If Length of Employment is less than 3 years a	present employer)	
Occupation Type Industry Sector Name of Employer Length of Employment Years in Line of Business	(YYMM Ex. 3 yrs 2 months = 0302) (YYMM Ex. 3 yrs 2 months = 0302)	Number Street Name Street Type Street Direction Unit City/Town Province Postal Code	
Income			
Type of Income Annual Income	\$	Other Income Source Other Annual Income	\$

NEXT: SUBJECT PROPERTY INFORMATION

SUBJECT PROPERTY INFORMATION		Items marked with * or in red are required.
Property Value / Address		
Purchase Price \$ MLS Listing Number Current Home Value \$ *For Refinance	Number Street Name Street Type Street Direction Unit City/Town Province Postal Code	
Expense Details		Same as Applicant 1's Address

Monthly Taxes \$
Tax Year

Monthly Condo Fee \$

NEXT: FINANCIAL INFORMATION

FINANCIAL INFORMATION

Items marked with \ast or in red are required.

Assets

Туре	Where / Financial Institution(s)	Amount / Value
Cash in Bank / Saving		\$
RRSP		\$
Gift		\$
Vehicle		\$
Stocks, bonds, Mutual funds, etc		\$
Other Assets		\$
Household Goods		\$
Life Insurance		\$
Deposit on purchased		\$

Liabilities

Туре	Where / Financial Institution(s)	Balance Owing	Monthly Payment
Credit Cards		\$	_
Bank/Personal Loans		\$	\$
Automobile Loan		\$	\$
Alimony		\$	\$
Child Support		\$	\$
Student Loan		\$	\$
Wage Garnishment		\$	\$
Other Liabilities		\$	\$
Unsecured Line of Credit		\$	
Income Tax		\$	\$
Secured Line of Credit		\$	
Lease		\$	\$
Auto Lease		\$	\$

NET WORTH = TOTAL ASSETS - TOTAL LIABILITIES

\$ = \$ - \$

REVIEW			Items marked with * or in red are requir
Note to Broker			
ACKNOWLEDGEMENT AND AGREEN	1ENT		
Thereby agree to all terms in the above agreement and: (a	a) certify that the information given in my applicat	tion is complete and correct, (b) consent to this agreement bein	g exchanged by email and other electronic
means, which may be less secure than mail, (c) consent th	nat this electronic agreement shall be deemed as v	valid as a paper contract, and (d) consent that my printed name	below shall act as my signature.
Applicant 2 (if applicable):	nd updates relevant to me and/or the mortgage i	ndustry. I understand my consent can be withdrawn at any time	ь.
		tion is complete and correct, (b) consent to this agreement bein valid as a paper contract, and (d) consent that my printed name	
	nd updates relevant to me and/or the mortgage ir	ndustry. I understand my consent can be withdrawn at any time	<u>.</u>
	(MM/DD/YYYY)		(MM/DD/YYYY)
Applicant 1's Signature (Your typed name is your signature)	Date	Applicant 2's Signature (Your typed name is your signature)	Date

END OF THE APPLICATION