



YOUR MORTGAGE **BROKER**

ADDRESS

E-MAIL

CUSTOMER **FIRST NAME**

CUSTOMER **LAST NAME**

CUSTOMER **PHONE #**



PLEASE COMPLETE THIS FORM ON **ADOBE READER**.  
CLICK HERE TO **GET IT FOR FREE** NOW.

# 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 INFORMATION

*Items marked with \* or in red are required.*

### Mortgage Details

\* Purpose of Loan  Purchase  Pre-Approval  
 Refinance  Switch

Mortgage Amount  
Required \$

Approx Date  
Funds Required \_\_\_\_\_  
(MM/DD/YYYY)

### Preferred Mortgage Options

Please select all that apply  Low rates at origination  Low rates at renewal  Flexible payment plans  Flexible prepayment options  
 Access to Credit Life Insurance

## APPLICANT 1 INFORMATION

Items marked with \* or in red are required.

### Identification

Title \_\_\_\_\_  
\* First Name \_\_\_\_\_  
\* Last Name \_\_\_\_\_  
Initial \_\_\_\_\_

\* Date of Birth \_\_\_\_\_ (MM/DD/YYYY)  
SIN # \_\_\_\_\_  
Home Phone # \_\_\_\_\_  
Work Phone # \_\_\_\_\_  
MobilePhone # \_\_\_\_\_  
E-mail Address \_\_\_\_\_

### Current Living Address

Residential Status  Own  Rent  
 Live with parents  Other  
Monthly Rent Payments \$ \_\_\_\_\_

Number \_\_\_\_\_  
Street Name \_\_\_\_\_  
Street Type \_\_\_\_\_  
Street Direction \_\_\_\_\_  
Unit \_\_\_\_\_  
City/Town \_\_\_\_\_  
Province \_\_\_\_\_  
Postal Code \_\_\_\_\_  
Time at Residence \_\_\_\_\_ YY \_\_\_\_\_ MM \_\_\_\_\_

### Previous Living Address (If Time at Residence is less than 3 years in current living address)

Residential Status  Own  Rent  
 Live with parents  Other  
Monthly Rent Payments \$ \_\_\_\_\_

Number \_\_\_\_\_  
Street Name \_\_\_\_\_  
Street Type \_\_\_\_\_  
Street Direction \_\_\_\_\_  
Unit \_\_\_\_\_  
City/Town \_\_\_\_\_  
Province \_\_\_\_\_  
Postal Code \_\_\_\_\_

**NEXT: APPLICANT 1 INFORMATION**

## APPLICANT 1 INFORMATION

Items marked with \* or in red are required.

### Present Employer

Occupation Type		Number	
Industry Sector		Street Name	
Name of Employer		Street Type	
Length of Employment	(YYMM Ex. 3 yrs 2 months = 0302)	Street Direction	
Years in Line of Business	(YYMM Ex. 3 yrs 2 months = 0302)	Unit	
		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 present employer)

Occupation Type		Number	
Industry Sector		Street Name	
Name of Employer		Street Type	
Length of Employment	(YYMM Ex. 3 yrs 2 months = 0302)	Street Direction	
Years in Line of Business	(YYMM Ex. 3 yrs 2 months = 0302)	Unit	
		City/Town	
		Province	
		Postal Code	

### Income

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

**NEXT: APPLICANT 2 INFORMATION**

## APPLICANT 2 INFORMATION

Items marked with \* or in red are required.

### Identification

Title \_\_\_\_\_  
First Name \_\_\_\_\_  
Last Name \_\_\_\_\_  
Initial \_\_\_\_\_

Date of Birth \_\_\_\_\_ (MM/DD/YYYY)  
SIN # \_\_\_\_\_  
Home Phone # \_\_\_\_\_  
Work Phone # \_\_\_\_\_  
Mobile Phone # \_\_\_\_\_  
E-mail Address \_\_\_\_\_

### Current Living Address

Same as Applicant 1

Residential Status  Own  Rent  
 Live with parents  Other  
Monthly Rent Payments \$ \_\_\_\_\_

Number \_\_\_\_\_  
Street Name \_\_\_\_\_  
Street Type \_\_\_\_\_  
Street Direction \_\_\_\_\_  
Unit \_\_\_\_\_  
City/Town \_\_\_\_\_  
Province \_\_\_\_\_  
Postal Code \_\_\_\_\_  
Time at Residence \_\_\_\_\_ YY \_\_\_\_\_ MM \_\_\_\_\_

### Previous Living Address

(If Time at Residence is less than 3 years in current living address)

Same as Applicant 1

Residential Status  Own  Rent  
 Live with parents  Other  
Monthly Rent Payments \$ \_\_\_\_\_

Number \_\_\_\_\_  
Street Name \_\_\_\_\_  
Street Type \_\_\_\_\_  
Street Direction \_\_\_\_\_  
Unit \_\_\_\_\_  
City/Town \_\_\_\_\_  
Province \_\_\_\_\_  
Postal Code \_\_\_\_\_

## APPLICANT 2 INFORMATION

Items marked with \* or in red are required.

### Present Employer

Occupation Type		Number	
Industry Sector		Street Name	
Name of Employer		Street Type	
Length of Employment	(YYMM Ex. 3 yrs 2 months = 0302)	Street Direction	
Years in Line of Business	(YYMM Ex. 3 yrs 2 months = 0302)	Unit	
		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 present employer)

Occupation Type		Number	
Industry Sector		Street Name	
Name of Employer		Street Type	
Length of Employment	(YYMM Ex. 3 yrs 2 months = 0302)	Street Direction	
Years in Line of Business	(YYMM Ex. 3 yrs 2 months = 0302)	Unit	
		City/Town	
		Province	
		Postal Code	

### Income

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

## 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 \_\_\_\_\_

*Same as Applicant 1's Address*

### Expense Details

Monthly Taxes \$ \_\_\_\_\_  
Tax Year \_\_\_\_\_

Monthly Condo Fee \$ \_\_\_\_\_

**NEXT: FINANCIAL INFORMATION**

## FINANCIAL INFORMATION

Items marked with \* or in red are required.

### Assets

Type	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

Type	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

\$ = \$ - \$

**NEXT: REVIEW**

## REVIEW

Items marked with \* or in red are required.

### Note to Broker

Large empty rectangular box for Note to Broker.

### ACKNOWLEDGEMENT AND AGREEMENT

I hereby agree to all terms in the above agreement and: (a) certify that the information given in my application is complete and correct, (b) consent to this agreement being exchanged by email and other electronic means, which may be less secure than mail, (c) consent that this electronic agreement shall be deemed as valid as a paper contract, and (d) consent that my printed name below shall act as my signature.  
I agree to receive electronic messages containing news and updates relevant to me and/or the mortgage industry. I understand my consent can be withdrawn at any time.

#### Applicant 2 (if applicable):

I hereby agree to all terms in the above agreement and: (a) certify that the information given in my application is complete and correct, (b) consent to this agreement being exchanged by email and other electronic means, which may be less secure than mail, (c) consent that this electronic agreement shall be deemed as valid as a paper contract, and (d) consent that my printed name below shall act as my signature.  
**(Only required if there is an Applicant 2)**

I agree to receive electronic messages containing news and updates relevant to me and/or the mortgage industry. I understand my consent can be withdrawn at any time.

Applicant 1's Signature  
(Your typed name is your signature)

Date

(MM/DD/YYYY)

Applicant 2's Signature  
(Your typed name is your signature)

Date

(MM/DD/YYYY)

**END OF THE APPLICATION**