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.
* Purpose of Loan Mortgage Amount Required	☐ Refinance	☐ Pre-Approval ☐ Switch	Approx Date Funds Required	(MM/DD/YYYY)
Preferred Mortgage C)ptions			
Please select all that apply	☐ Low rates at origin☐ Access to Credit Lin		enewal 🔲 Flexible payment plans	☐ Flexible prepayment options



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

Postal Code

APPLICANT 1 INFORMATION Items marked with * or in red are required. Present 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 City/Town (YYMM Ex. 3 yrs 2 months = 0302) Province Postal Code Income Other Income Source Type of Income Annual Income Other Annual Income Past Employer (If Length of Employment is less than 3 years at present employer) Number Occupation Type Street Name **Industry Sector** Street Type Street Direction Name of Employer Unit Length of Employment (YYMM Ex. 3 yrs 2 months = 0302) City/Town Years in Line of Business (YYMM Ex. 3 yrs 2 months = 0302) Province Postal Code

Income

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

APPLICANT 2 INF	ORMATION			ltem:	s 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	s				Same as Applicant 1
Residential Status	□ Own	☐ Rent	Number		
	\Box 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 Addre	(If Time at Re	sidence is less than 3 year	rs in current living address)		Same as Applicant 1
Residential Status	□ Own	☐ Rent	Number		
	\Box Live with parents	☐ Other	Street Name		
Monthly Rent Payments	\$		Street Type		
			Street Direction		
			Unit		
			City/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 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	\$
Past Employer	(If Length of Employment is less than 3 years a	t 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	\$

SUBJECT PROPERTY INFORMATION	ltems 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 \$	Monthly Condo Fee \$

Tax Year

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 required
Note to Broker			
ACKNOWLEDGEMENT AND AGREEM	1ENT		
		tion is complete and correct, (b) consent to this agreement bein valid as a paper contract, and (d) consent that my printed name	
		industry. I understand my consent can be withdrawn at any tim	
Applicant 2 (if applicable):			
		tion is complete and correct, (b) consent to this agreement bein valid as a paper contract, and (d) consent that my printed name	
l agree to receive electronic messages containing news ar	nd updates relevant to me and/or the mortgage i	industry. I understand my consent can be withdrawn at any time	2.
	(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

