





# YOUR MORTGAGE APPLICATION FORM

PLEASE COMPLETE THE FOLLOWING MORTGAGE APPLICATION IN AS MUCH DETAIL AS YOU CAN (REQUIRED INFORMATION HAS BEEN HIGHLIGHTED), THEN CLICK SUBMIT. I WILL REVIEW THE INFORMATION, THEN CONTACT YOU TO DISCUSS YOUR APPLICATION, ANSWER ANY QUESTIONS YOU MIGHT HAVE, AND EXPLAIN NEXT STEPS.

\* MANDATORY FIELD

01/07

PLEASE COMPLETE THIS FORM ON ADOBE READER
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### MORTGAGE DETAILS

TYPE OF LOAN:*	PURPOSE OF LOAN:*	
VALUE OF HOME:*	MORTGAGE AMOUNT REQUIRED:*	APPROX DATE FUNDS REQUIRED: (MMDDYYYY)*

## **PERSONAL INFORMATION - APPLICANT 1**

IDENTIFICATION				
TITLE:	FIRST NAME:*	LAST NAME:*		INITIAL:
DATE OF BIRTH: (MMD	DYYYY)* SIN:	E-MAIL A	ADDRESS:*	
MARITAL STATUS:				
CURRENT LIVING AD	DDRESS			
NUMBER:*	STREET NAME:* UN	NIT #; CIT	Y/TOWN:*	
PROVINCE:*	POSTAL/ZIP CODEMOME PH.:	#: (1112223333)*	CELL PH.#: (1112223333)	
TIME AT ADDRESS: (YYM	MM) (EG. 4 YEARS & 2 MONTHS = 0402)*			
PREVIOUS ADDRESS	SES (OPTIONAL; WITHIN THE LAST THREE YEARS)			
NUMBER:*			Y/TOWN:*	
NOMBER.	STREET NAME.		i) iowii.	
PROVINCE:*	POSTAL/ZIP CODERESIDENT	IAL STATUS*		
TIME AT ADDRESS: (W)	MM) (EG. 4 YEARS & 2 MONTHS = 0402)*			

## **PERSONAL INFORMATION - APPLICANT 1**

OCCUPATION TYPE:*	NAME OF EMPLOYER:*	JOB TITLE:*	WORK PH.#: (1112223333)
ENGTH OF EMPLOYMENT: (Y	YMM) (EG. 4 YEARS & 2 MONTHS = 0402)*	ANNUAL INCOME:*	TYPE OF INCOME:*
REVIOUS EMPLOYER CCUPATION TYPE:*	(OPTIONAL; WITHIN THE LAST TH	JOB TITLE:*	WORK PH.#: (1112223333)

## **PERSONAL INFORMATION - APPLICANT 2**

(LEAVE THIS SECTION BLANK IF YOU DO NOT WISH TO ENTER A SECOND APPLICANT)

IDENTIFICATION	
TITLE: FIRST NAME:*	LAST NAME:* INITIAL:
DATE OF BIRTH: (MMDDYYYY)* SIN:	E-MAIL ADDRESS:*
MARITAL STATUS:	
CURRENT LIVING ADDRESS	
NUMBER:* STREET NAME:* UNIT #	: CITY/TOWN:*
PROVINCE:* POSTAL/ZIP CODEĦOME PH.#: (1	112223333)* CELL PH.#: (1112223333)
POSTAL/ZIF CODETONE PIL.#(1	CLLL F11.#. (1112225353)
TIME AT ADDRESS: (YYMM) (EG. 4 YEARS & 2 MONTHS = 0402)*	
PRESENT EMPLOYER	
OCCUPATION TYPE:* NAME OF EMPLOYER:* JOB	TITLE:* WORK PH.#: (1112223333)
OCCUPATION TIPE. INAME OF EMPLOYER. 30B	WORKFILM. (112223333)
LENGTH OF EMPLOYMENT: (YYMM) (EG. 4 YEARS & 2 MONTHS = 0402)*  ANNUAL INCO	ME:* TYPE OF INCOME:*
PREVIOUS EMPLOYER (OPTIONAL; WITHIN THE LAST THREE YEARS)	
OCCUPATION TYPE:* NAME OF EMPLOYER:* JOB	TITLE:* WORK PH.#: (1112223333)
LENGTH OF EMPLOYMENT: (YYMM) (EG. 4 YEARS & 2 MONTHS = 0402)* ANNUAL INCO	ME:* TYPE OF INCOME:*

## FINANCIAL INFORMATION

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TYPE	WHERE/FINANCIAL INSTITUTION(S)	AMOUNT/VALUE	
Cash Savings			
RRSP			
Stocks/Bonds/Mutual			
Automotive: present value			
Value of present home (if owned)			
Other			
TOTAL:			
LIABILITIES			
ТУРЕ	WHERE/FINANCIAL INSTITUTION(S)	BALANCE OWING	MONTHLY PAYMENTS
	WHERE/FINANCIAL INSTITUTION(S)	BALANCE OWING	MONTHLY PAYMENTS
ТҮРЕ	WHERE/FINANCIAL INSTITUTION(S)	BALANCE OWING	MONTHLY PAYMENTS
TYPE  Debts/Loans	WHERE/FINANCIAL INSTITUTION(S)	BALANCE OWING	MONTHLY PAYMENTS
TYPE  Debts/Loans  Credit Cards	WHERE/FINANCIAL INSTITUTION(S)	BALANCE OWING	MONTHLY PAYMENTS
TYPE  Debts/Loans  Credit Cards  Amount owing on current mortgage(s)	WHERE/FINANCIAL INSTITUTION(S)	BALANCE OWING	MONTHLY PAYMENTS

## **CURRENT MORTGAGES/PROPERTIES OWNED**

(LEAVE THIS SECTION BLANK IF YOU DO NOT WISH TO ENTER CURRENT MORTGAGE/PROPERTIES)

PROPERTY#1				
NUMBER:*	STREET NAME:*	UNIT #:	CITY/TOWN:*	
DDOWNCE*	DOCTAL /ZID.C	ODE#DODEDTYVALUE.*	DENITAL INCO	DME.
PROVINCE:*	POSTAL/ZIPC	ODEPROPERTY VALUE:*	RENTAL INCO	DME;
ALL FIELDS BELOW	ARE REQUIRED IF YOU HAVE A CU	RRENT MORTGAGE*		
EXISTING MORTGAGE B	was war film - " " " " was new 25 i		HLY PAYMENTS:	MORTGAGE BALANCE:
PROPERTY#2				
NUMBER:*	STREET NAME:*	UNIT #:	CITY/TOWN:*	
PROVINCE:*	POSTAL/ZIP C	ODEPROPERTY VALUE:*	RENTAL INCO	DME:
ALL FIELDS BELOW	ARE REQUIRED IF YOU HAVE A CU	RRENT MORTGAGE*		
EXISTING MORTGAGE B			HLY PAYMENTS:	MORTGAGE BALANCE:
			) [	
PROPERTY#3				
NUMBER:*	STREET NAME:*	UNIT #:	CITY/TOWN:*	
PROVINCE:*	POSTAL/ZIP C	ODEPROPERTY VALUE:*	RENTAL INCO	DME:
ALL FIELDS DELOW	ARE REQUIRED IF YOU HAVE A CU	DDENT MODTOACE*		
EXISTING MORTGAGE B			HLY PAYMENTS:	MORTGAGE BALANCE:

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ADDITIONAL NOTE FOR FINANCIAL I	NFORMATION: (MAX. 500 CHARACTE	ERS)		
my/our credit responsibility. You are bureau) and each such source is her application form as well as other inf	e authorized to obtain any informati reby authorized to provide you with formation you obtain in relation to n ns providing technological or other s ationship. You may retain our applic pperty appraisal, registration, and ot	ion you may require for these pi such information. I/we also und my credit history may be disclos support services required in rela ation and other personal inform ther costs or expenses incurred	urposes from othe derstand that the sed to potential mation to this appli nation whether of by you in connec	nortgage lenders, financial intermediary ication and any other parties with whom r not any transaction is ultimately tion with this transaction. I/we also
Online Applications	,			
Please read the paragraph above pr	ior to sending completed applicatio	on. By transmitting the online m	ortgage applicati	ion you are accepting the terms of the
paragraph noted above.				
CANADA'S ANTI-SPAM LEGISLAT	TON			
	s effective as of July 1, 2014. Under t test mortgage news, events, produc		obtain your cons	sent in order to continue sending you
PLEASE CONFIRM YOUR CONSENT T	O RECEIVING ELECTRONIC COMMUN	NICATIONS.* YES	N	0
SIGNATURE REQUIRED IF THIS D	OCUMENT IS PRINTED. NOT REC	QUIRED FOR ONLINE SUBMIS	SSION.	
APPLICANT 1'S SIGNATURE:	DATE:	APPLICANT 2'S	SIGNATURE:	DATE:
<b>D</b> /	41	1 ( 1		,
	se save the co			
ema	il it to info@ge	ettheidealmo	rtgage.	.com
or DI	rint, scan and i	fax it to 902-	453-61	104.
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OTHER INFORMATION