

### 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

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

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| 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: (MMDDYYYY  | y)* SIN:   | E-MAIL ADDRESS:*                    |          |
|                           |  |                                     |          |
| CURRENT LIVING ADDRES     | ss   |                                     |          |
| NUMBER:* S                | TREET NAME:* UNIT #                                | : CITY/TOWN:*                       |          |
|                           |  |                                     |          |
| PROVINCE:*                | POSTAL CODE:* HOME PH.#: (1                        | 112223333)* CELL PH.#: (1112223333) |          |
|                           |  |                                     |          |
| TIME AT ADDRESS: (YYMM) ( | EG. 4 YEARS & 2 MONTHS = 0402)*                    |                                     |          |
| PRESENT EMPLOYER          |  |                                     |          |
| OCCUPATION TYPE:*         | NAME OF EMPLOYER:* JOB                             | TITLE:* WORK PH.#: (111222333       | 33)      |
| LENGTH OF EMPLOYMENT:     | (YYMM) (EG. 4 YEARS & 2 MONTHS = 0402)(NNUAL INCOI | ME:* TYPE OF INCOME:*               |          |
|                           |  |                                     |          |
| TYPE OF EMPLOYE:*         |  |                                     |          |

#### **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: (MMDDY                   | YYY)* SIN:   | E-MAIL ADDRESS:*                    |          |
|   |  |                                     |          |
| CURRENT LIVING ADDR                     | RESS   |                                     |          |
| NUMBER:*                                | STREET NAME:* UNIT #                                 | : CITY/TOWN:*                       |          |
| PROVINCE:*                              | POSTAL CODE:* HOME PH.#: (1:                         | 112223333)* CELL PH.#: (1112223333) |          |
|   |  |                                     |          |
| TIME AT ADDRESS: (YYMM                  | 1) (EG. 4 YEARS & 2 MONTHS = 0402)*                  |                                     |          |
| PRESENT EMPLOYER                        |  |                                     |          |
| OCCUPATION TYPE:*                       | NAME OF EMPLOYER:* JOB                               | TITLE:* WORK PH.#: (11122233        | 333)     |
| LENGTH OF EMPLOYMENT  TYPE OF EMPLOYE:* | T: (YYMM) (EG. 4 YEARS & 2 MONTHS = 0402ANNUAL INCOM | ME:* TYPE OF INCOME:*               |          |
|   |  |                                     |          |

#### **FINANCIAL INFORMATION**

| ТҮРЕ                                  | WHERE/FINANCIAL INSTITUTION(S) | AMOUNT/VALUE  |                  |
|---------------------------------------|--------------------------------|---------------|------------------|
| Cash Savings                          |                                |               |                  |
| RRSP                                  |                                |               |                  |
| Stocks/Bonds/Mutual                   |                                |               |                  |
| Automotive: present value             |                                |               |                  |
| Value of present home (if owned)      |                                |               |                  |
| Other                                 |                                |               |                  |
| TOTAL:                                |                                |               |                  |
| LIABILITIES                           |                                |               |                  |
| TYPE                                  | WHERE/FINANCIAL INSTITUTION(S) | BALANCE OWING | MONTHLY PAYMENTS |
| Debts/Loans                           |                                |               |                  |
| Credit Cards                          |                                |               |                  |
| Amount owing on current mortgage(s)   |                                |               |                  |
| Finance company loans and other debts |                                |               |                  |
| Thance company to and and other debts |                                |               |                  |
| TOTAL:                                |                                |               |                  |
|                                       |                                |               |                  |

#### **OTHER INFORMATION**

OTHER INFORMATION CATEGORY:\*

| ADDITIONAL NOTE FOR FINANCIAL I   | NFORMATION: (MAX. 500 CHARACTERS   | 5)   |  |   |   |   |
|---|--|--|--|---|---|---|
|   |  |  |  |   |   |   |
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|   |  |  |  |   |   |   |
| my/our credit responsibility. You are<br>bureau) and each such source is her<br>application form as well as other inf | information given in the mortgage appli<br>e authorized to obtain any information<br>reby authorized to provide you with suc<br>formation you obtain in relation to my<br>ins providing technological or other sup<br>ationship. | n you may req<br>ch informatio<br>credit history | uire for these purpos<br>n. I/we also underst<br>may be disclosed to | ses from other<br>and that the in<br>potential mo | sources (including, for ex<br>formation given in the m<br>rtgage lenders, financial | xample, credit<br>ortgage<br>intermediary |
| Online Applications   |  |  |  |   |   |   |
| Please read the paragraph above pr<br>paragraph noted above.  | rior to sending completed application.   | By transmitti                                    | ng the online mortga   | age application                                   | n you are accepting the to  | erms of the                               |
| CANADA'S ANTI-SPAM LEGISLAT   | TON  |  |  |   |   |   |
|   | s effective as of July 1, 2014. Under this<br>test mortgage news, events, products,  |  |  | nin your conse                                    | nt in order to continue se  | nding you                                 |
| PLEASE CONFIRM YOUR CONSENT T   | TO RECEIVING ELECTRONIC COMMUNIC   | CATIONS.*  |  | YES   | NO  |   |
|   |  |  |  |   |   |   |
| SIGNATURE REQUIRED IF THIS D  | OCUMENT IS PRINTED. NOT REQU   | IRED FOR O                                       | NLINE SUBMISSIO  | N.  |   |   |
| APPLICANT 1'S SIGNATURE:  | DATE:  |  | APPLICANT 2'S SIGNA  | ATURE:  | DATE:   |   |
|   |  |  |  |   |   |   |
|   |  |  |  |   |   |   |
|   |  |  |  |   |   |   |
|   |  |  |  |   |   |   |



## **CHAUDHARY PRASHANT**

Agent

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