

### 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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#### **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: (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) NUAL INCOME:*  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	S)		
my/our credit responsibility. You are bureau) and each such source is her application form as well as other in	e authorized to obtain any information reby authorized to provide you with su formation you obtain in relation to my ns providing technological or other sup	n you may requ ch information credit history	uire for these purposes from othe n. I/we also understand that the i may be disclosed to potential ma	rstand that it is being used to determine or sources (including, for example, credit information given in the mortgage ortgage lenders, financial intermediary tation and any other parties with whom
Online Applications				
Please read the paragraph above pr paragraph noted above.	ior to sending completed application.	By transmittin	ng the online mortgage application	on you are accepting the terms of the
CANADA'S ANTI-SPAM LEGISLAT	TION			
	s effective as of July 1, 2014. Under this test mortgage news, events, products,			ent in order to continue sending you
PLEASE CONFIRM YOUR CONSENT T	O RECEIVING ELECTRONIC COMMUNIC	CATIONS.*	YES	NO
SIGNATURE REQUIRED IF THIS D	OCUMENT IS PRINTED. NOT REQU	JIRED FOR OI	NLINE SUBMISSION.	
APPLICANT 1'S SIGNATURE:	DATE:	А	PPLICANT 2'S SIGNATURE:	DATE:



## **Guillermo Batres Franco**

Agent

Tel: 647-567-2706 Mobile: 647-567-2706 2 | 5757 Kennedy Road | Mississauga | Ontario | L4Z 0C5

