

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 FINANC	IAL INFORMATION: (MAX. 500 CHARACTE	RS)			
Live warrant and confirm that t	ha information diversity the most garden		Lackroot and I (via under	otand that it is being used to	datarmina
my/our credit responsibility. Yo	the information given in the mortgage ap u are authorized to obtain any information.	on you may require for th	ese purposes from othe	r sources (including, for exan	nple, credit
application form as well as other	s hereby authorized to provide you with ser information you obtain in relation to m	y credit history may be d	isclosed to potential mo	ortgage lenders, financial inte	ermediary
I/we propose to have a financia	ations providing technological or other s l relationship.	upport services required	in relation to this applic	ation and any other parties v	vith whom
Online Applications					
Please read the paragraph above paragraph noted above.	ve prior to sending completed application	n. By transmitting the onl	ine mortgage application	on you are accepting the term	is of the
CANADA'S ANTI-SPAM LEGIS	I ATION				
	was effective as of July 1, 2014. Under the	nis legislation. Lam requi	red to obtain your conse	ent in order to continue sendi	ing you
	ne latest mortgage news, events, product		ed to obtain your conse	ent in order to continue sendi	ng you
PLEASE CONFIRM YOUR CONSE	NT TO RECEIVING ELECTRONIC COMMUN	IICATIONS.*	YES	NO	
SIGNATURE REQUIRED IF TH	IIS DOCUMENT IS PRINTED. NOT REQ	UIRED FOR ONLINE SU	JBMISSION.		
APPLICANT 1'S SIGNATURE:	DATE:	APPLICAN:	T 2'S SIGNATURE:	DATE:	
	Karen Youngs				
	Mortgage Agent Level 1				
	Tel: 613-656-0762	Fax: 613-798-1137			

Suite 300 | 1701 Woodward Drive | Ottawa | Ontario | K2C 0R4

