



YOUR MORTGAGE **BROKER** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

E-MAIL \_\_\_\_\_

CUSTOMER **FIRST NAME** \_\_\_\_\_

CUSTOMER **LAST NAME** \_\_\_\_\_

CUSTOMER **PHONE #** \_\_\_\_\_



PLEASE COMPLETE THIS FORM ON **ADOBE READER** .  
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# 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 INFORMATION

Items marked with \* or in red are required.

### Mortgage Details

- \* Purpose of Loan  Purchase  Pre-Approval
- Refinance  Switch

Mortgage Amount Required \$ \_\_\_\_\_

Approx Date Funds Required \_\_\_\_\_ (MM/DD/YYYY)

### Preferred Mortgage Options

- Please select all that apply  Low rates at origination  Low rates at renewal  Flexible payment plans  Flexible prepayment options
- Access to Credit Life Insurance



**NEXT:** APPLICANT 1 INFORMATION

## APPLICANT 1 INFORMATION

Items marked with \* or in red are required.

### Identification

Title \_\_\_\_\_

\* First Name \_\_\_\_\_

\* Last Name \_\_\_\_\_

Initial \_\_\_\_\_

\* Date of Birth \_\_\_\_\_ (MM/DD/YYYY)

SIN # \_\_\_\_\_

Home Phone # \_\_\_\_\_

Work Phone # \_\_\_\_\_

MobilePhone # \_\_\_\_\_

E-mail Address \_\_\_\_\_

### Current Living Address

Residential Status  Own  Rent  
 Live with parents  Other

Monthly Rent Payments \$ \_\_\_\_\_

Number \_\_\_\_\_

Street Name \_\_\_\_\_

Street Type \_\_\_\_\_

Street Direction \_\_\_\_\_

Unit \_\_\_\_\_

City/Town \_\_\_\_\_

Province \_\_\_\_\_

Postal Code \_\_\_\_\_

Time at Residence                      YY                      MM

### Previous Living Address (If Time at Residence is less than 3 years in current living address)

Residential Status  Own  Rent  
 Live with parents  Other

Monthly Rent Payments \$ \_\_\_\_\_

Number \_\_\_\_\_

Street Name \_\_\_\_\_

Street Type \_\_\_\_\_

Street Direction \_\_\_\_\_

Unit \_\_\_\_\_

City/Town \_\_\_\_\_

Province \_\_\_\_\_

Postal Code \_\_\_\_\_

**NEXT:** APPLICANT 1 INFORMATION

## APPLICANT 1 INFORMATION

Items marked with \* or in red are required.

### Present Employer

Occupation Type \_\_\_\_\_  
Industry Sector \_\_\_\_\_  
Name of Employer \_\_\_\_\_  
Length of Employment \_\_\_\_\_ (YYMM Ex. 3 yrs 2 months = 0302)  
Years in Line of Business \_\_\_\_\_ (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 at present employer)

Occupation Type \_\_\_\_\_  
Industry Sector \_\_\_\_\_  
Name of Employer \_\_\_\_\_  
Length of Employment \_\_\_\_\_ (YYMM Ex. 3 yrs 2 months = 0302)  
Years in Line of Business \_\_\_\_\_ (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 \$ \_\_\_\_\_

**NEXT:** APPLICANT 2 INFORMATION

## APPLICANT 2 INFORMATION

Items marked with \* or in red are required.

### Identification

Title \_\_\_\_\_  
First Name \_\_\_\_\_  
Last Name \_\_\_\_\_  
Initial \_\_\_\_\_

Date of Birth \_\_\_\_\_ (MM/DD/YYYY)  
SIN # \_\_\_\_\_  
Home Phone # \_\_\_\_\_  
Work Phone # \_\_\_\_\_  
Mobile Phone # \_\_\_\_\_  
E-mail Address \_\_\_\_\_

### Current Living Address

Same as Applicant 1

Residential Status  Own  Rent  
 Live with parents  Other  
Monthly Rent Payments \$ \_\_\_\_\_

Number \_\_\_\_\_  
Street Name \_\_\_\_\_  
Street Type \_\_\_\_\_  
Street Direction \_\_\_\_\_  
Unit \_\_\_\_\_  
City/Town \_\_\_\_\_  
Province \_\_\_\_\_  
Postal Code \_\_\_\_\_  
Time at Residence YY MM

### Previous Living Address

(If Time at Residence is less than 3 years in current living address)

Same as Applicant 1

Residential Status  Own  Rent  
 Live with parents  Other  
Monthly Rent Payments \$ \_\_\_\_\_

Number \_\_\_\_\_  
Street Name \_\_\_\_\_  
Street Type \_\_\_\_\_  
Street Direction \_\_\_\_\_  
Unit \_\_\_\_\_  
City/Town \_\_\_\_\_  
Province \_\_\_\_\_  
Postal Code \_\_\_\_\_

## APPLICANT 2 INFORMATION

Items marked with \* or in red are required.

### Present Employer

|                           |  |                  |       |
|---------------------------|--|------------------|-------|
| Occupation Type           | _____                                  | Number           | _____ |
| Industry Sector           | _____                                  | Street Name      | _____ |
| Name of Employer          | _____                                  | Street Type      | _____ |
| Length of Employment      | _____ (YYMM Ex. 3 yrs 2 months = 0302) | Street Direction | _____ |
| Years in Line of Business | _____ (YYMM Ex. 3 yrs 2 months = 0302) | Unit             | _____ |
|                           |  | City/Town        | _____ |
|                           |  | Province         | _____ |
|                           |  | Postal Code      | _____ |

### Income

|                |          |                     |          |
|----------------|----------|---------------------|----------|
| Type of Income | _____    | Other Income Source | _____    |
| Annual Income  | \$ _____ | Other Annual Income | \$ _____ |

### Past Employer

(If Length of Employment is less than 3 years at present employer)

|                           |  |                  |       |
|---------------------------|--|------------------|-------|
| Occupation Type           | _____                                  | Number           | _____ |
| Industry Sector           | _____                                  | Street Name      | _____ |
| Name of Employer          | _____                                  | Street Type      | _____ |
| Length of Employment      | _____ (YYMM Ex. 3 yrs 2 months = 0302) | Street Direction | _____ |
| Years in Line of Business | _____ (YYMM Ex. 3 yrs 2 months = 0302) | Unit             | _____ |
|                           |  | City/Town        | _____ |
|                           |  | Province         | _____ |
|                           |  | Postal Code      | _____ |

### Income

|                |          |                     |          |
|----------------|----------|---------------------|----------|
| Type of Income | _____    | Other Income Source | _____    |
| Annual Income  | \$ _____ | Other Annual Income | \$ _____ |

**NEXT:** SUBJECT PROPERTY INFORMATION

## SUBJECT PROPERTY INFORMATION

Items 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 \$ \_\_\_\_\_  
Tax Year \_\_\_\_\_

Monthly Condo Fee \$ \_\_\_\_\_

**NEXT:** FINANCIAL INFORMATION

## FINANCIAL INFORMATION

Items marked with \* or in red are required.

### Assets

| Type                             | 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

| Type                     | Where / Financial Institution(s) | Balance Owning | 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               |                                  | \$             | \$              |

$$\text{NET WORTH} = \text{TOTAL ASSETS} - \text{TOTAL LIABILITIES}$$

\$ = \$ - \$

**NEXT: REVIEW**

## REVIEW

Items marked with \* or in red are required.

### Note to Broker

### ACKNOWLEDGEMENT AND AGREEMENT

I hereby agree to all terms in the above agreement and: (a) certify that the information given in my application is complete and correct, (b) consent to this agreement being exchanged by email and other electronic means, which may be less secure than mail, (c) consent that this electronic agreement shall be deemed as valid as a paper contract, and (d) consent that my printed name below shall act as my signature.  
I agree to receive electronic messages containing news and updates relevant to me and/or the mortgage industry. I understand my consent can be withdrawn at any time.

**Applicant 2 (if applicable):**

I hereby agree to all terms in the above agreement and: (a) certify that the information given in my application is complete and correct, (b) consent to this agreement being exchanged by email and other electronic means, which may be less secure than mail, (c) consent that this electronic agreement shall be deemed as valid as a paper contract, and (d) consent that my printed name below shall act as my signature.  
**(Only required if there is an Applicant 2)**

I agree to receive electronic messages containing news and updates relevant to me and/or the mortgage industry. I understand my consent can be withdrawn at any time.

|   |              |   |              |
|---|--------------|---|--------------|
|   | (MM/DD/YYYY) |   | (MM/DD/YYYY) |
| Applicant 1's Signature<br><i>(Your typed name is your signature)</i> | Date         | Applicant 2's Signature<br><i>(Your typed name is your signature)</i> | Date         |

**END OF THE APPLICATION**