



broker	company		
street	city		
province	postal code		
email	phone	fax	cell phone

PERSONAL INFORMATION (client)

PRINCIPAL APPLICANT

Title Mr. Mrs. Ms. Miss.

First Name

Middle Name

Last Name

Date of Birth SIN

Marital Status Married Single Divorced Common Law

#of Dependants

CURRENT ADDRESS

Street

City

Province

Postal Code

Years There Own Rent

Monthly Payment/Rent

Home Phone

Cellphone

Work Phone

Email

If less than 3 years, please provide your previous address

Street

City

Province

Postal Code

Years There Owned Rented

CO-APPLICANT (if necessary)

Title Mr. Mrs. Ms. Miss.

First Name

Middle Name

Last Name

Date of Birth SIN

Marital Status Married Single Divorced Common Law

of Dependants

CURRENT ADDRESS

Street

City

Province

Postal Code

Years There Own Rent

Monthly Payment/Rent

Home Phone

Cellphone

Work Phone

Email

If less than 3 years, please provide your previous address

Street

City

Province

Postal Code

Years There Owned Rented

EMPLOYMENT INFORMATION

PRINCIPAL APPLICANT

Current Employer

Street Address

City and Province

Position

Income Type Salary Contract Self

Annual Income

Years There

If less than 3 years, please provide your previous address

Previous Employer

Address

City and Province

Position

Income Type Salary Contract Self

Years There

Other Sources of Income

Description

Amount

CO-APPLICANT

Current Employer

Street Address

City and Province

Position

Income Type Salary Contract Self

Annual Income

Years There

If less than 3 years, please provide your previous address

Previous Employer

Address

City and Province

Position

Income Type Salary Contract Self

Years There

Other Sources of Income

Description

Amount

ASSETS

PRINCIPAL APPLICANT

Balance

Savings Account Balance

Chequing Account Balance

RRSP Balance

Stocks/Bonds

Vehicle(s) Value

Residence

Other Real Estate

Other

Name of Bank

CO- APPLICANT

Balance

Savings Account Balance

Chequing Account Balance

RRSP Balance

Stocks/Bonds

Vehicle(s) Value

Residence

Other Real Estate

Other

Name of Bank

LIABILITIES

PRINCIPAL APPLICANT	Monthly Payment	Outstanding Balance
Mortgage	<input type="text"/>	<input type="text"/>
Credit Cards (<i>all cards</i>)	<input type="text"/>	<input type="text"/>
RRSP Loan	<input type="text"/>	<input type="text"/>
Automobile Loan(s)	<input type="text"/>	<input type="text"/>
Bank Loan(s)	<input type="text"/>	<input type="text"/>
Residence	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>
Name of Bank	<input type="text"/>	<input type="text"/>

CO- APPLICANT	Monthly Payment	Outstanding Balance
Mortgage	<input type="text"/>	<input type="text"/>
Credit Cards (<i>all cards</i>)	<input type="text"/>	<input type="text"/>
RRSP Loan	<input type="text"/>	<input type="text"/>
Automobile Loan(s)	<input type="text"/>	<input type="text"/>
Bank Loan(s)	<input type="text"/>	<input type="text"/>
Residence	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>
Name of Bank	<input type="text"/>	<input type="text"/>

SIGNATURES

Signature of Applicant

Date

Signature of Co-Borrower
(if applicable)

Date

We hereby certify that the information given in my/our mortgage application is complete, correct and is given for the purpose of obtaining the mortgage loan and/or financial services applied for.

I/We authorize the receipt and exchange of information about me/us with your affiliates from time to time as you deem appropriate and to the sharing or exchange of reports and information with the credit reporting agencies, credit bureaus, mortgage insurers, and/or any other person, corporation, firm or enterprise with whom I/We have or propose to have a financial relationship.