

MORTGAGE APPLICATION : PRE-APPROVAL FORM

PERSONAL	APPLICANT *				CO-APPLICANT *					
	FIRST NAME *									
	LAST NAME *									
	HOME TELEPHONE *									
	WORK TELEPHONE *									
	CELL PHONE (if applicable) *									
	EMAIL *									
	CURRENT ADDRESS *									
	CITY / PROVINCE / POSTAL *									
	YEARS THERE *									
OWN OR RENT * OWN <input type="checkbox"/> RENT <input type="checkbox"/> Payment/ Mth <input style="width: 50px;" type="text"/>										
IF OWN GIVE DETAILS OF MORTGAGE				Balance	Lender	Maturity				
PREVIOUS ADDRESS (IF UNDER 3 YRS in PRESENT)										
CITY / PROVINCE/ POSTAL										
YEARS THERE										
BIRTH DATE *				BIRTH DATE *						
S.I.N. *				S.I.N. *						
MARITAL STATUS				# DEPENDANTS						
EMPLOYMENT	CURRENT EMPLOYER *									
	EMPLOYER ADDRESS *									
	CITY / PROVINCE/ POSTAL *									
	OCCUPATION									
	YEARS THERE *		HOURLY	SALARY			HOURLY	SALARY		
	ANNUAL INCOME *									
	OTHER INCOME (Support/Alimony)									
	PREVIOUS EMPLOYER (IF UNDER 3 YRS WITH PRESENT)									
	ADDRESS									
	CITY /PROVINCE / POSTAL									
OCCUPATION										
YEARS THERE		Annual Income				Annual Income				
FINANCIAL	ASSETS *				LIABILITIES					
	CASH IN SAVINGS ACCOUNTS _____				VISA N/A					
	CHEQUING ACCOUNT _____				MASTERCARD N/A					
	REAL ESTATE DEPOSIT _____				OTHER N/A					
	TERM DEPOSITS & G.I.C's _____				OTHER N/A					
	STOCKS & BONDS _____				INCOME TAX OWED _____					
	OTHER _____				ALIMONY / SUPPORT _____					
	RRSP's _____				PRESENT MONTHLY RENT					
	Year		Make		Current Value		Leased/Loan through		Monthly Pmt. Balance	
	AUTOMOBILE #1 _____				LEASE/Loan _____					
AUTOMOBILE #2 _____				LEASE/Loan _____						
BANK	NAME OF BANK _____									
	BRANCH _____									
	TYPE of ACCOUNT Chequing <input type="checkbox"/> Savings <input type="checkbox"/>									
	CURRENT CO-SIGNER ON LOAN Yes <input type="checkbox"/> No <input type="checkbox"/>				CURRENT GUARANTOR ON LOAN		Yes <input type="checkbox"/> No <input type="checkbox"/>			
	BANKRUPCY IN PAST 7 YEARS * Yes <input type="checkbox"/> No <input type="checkbox"/>		Bankruptcy Amount		Discharge Date					
VALUE OF PROPERTY * \$ _____				DOWN PAYMENT * \$ _____						
*MUST BE COMPLETED FOR APPROVAL										

FULL APPROVALS (You have made an offer on a home)

LEGAL	SOLICITOR'S FIRM _____ ADDRESS _____	
	SOLICITOR'S NAME _____ CITY/ PROVINCE /POSTAL _____	
	TELEPHONE _____ FACSIMILE _____	
MORTGAGE INFO	MORTGAGE TYPE	1ST <input type="checkbox"/> 2ND <input type="checkbox"/> VARIABLE <input type="checkbox"/> FIXED <input type="checkbox"/> COVENTIONAL <input type="checkbox"/> HIGH RATIO <input type="checkbox"/>
	AMORTIZATION PERIOD	_____ TERM _____ REPAYMENT : Weekly <input type="checkbox"/> Bi Weekly <input type="checkbox"/> Monthly <input type="checkbox"/>
	PROPERTY TAXES	By Lender <input type="checkbox"/> By Owner <input type="checkbox"/> FIRST TIME BUYER Yes <input type="checkbox"/> No <input type="checkbox"/>
	MORTGAGE PURPOSE	Purchase <input type="checkbox"/> Refinance <input type="checkbox"/> Consolidation <input type="checkbox"/>
	DOWN PAYMENT OR EQUITY AMOUNT	\$0.00 SOURCE of DOWN PAYMENT _____
	PURCHASE PRICE/Appraised Value	_____ PROPERTY TAXES _____ FOR THE YEAR _____
	OTHER CONCURRENT MORTGAGE	_____ CLOSING DATE _____
PROPERTY INFORMATION	ADDRESS _____	
	CITY / PROVINCE / POSTAL _____	
	LOT SIZE _____	
	BLOCK / PLAN _____	
	TOWNSHIP _____	
	BUILDING TYPE 1 Storey <input type="checkbox"/> 2 Storey <input type="checkbox"/> Townhouse <input type="checkbox"/> Apt <input type="checkbox"/>	
	ZONING Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Agricultural <input type="checkbox"/>	
	OCCUPANCY Owner Occ <input type="checkbox"/> Rental <input type="checkbox"/> Owner Occ & Rental <input type="checkbox"/>	
	CONSTRUCTION TYPE Standard <input type="checkbox"/> Custom <input type="checkbox"/>	
	EXTERIOR FINISH Brick <input type="checkbox"/> Vinyl <input type="checkbox"/> Stone <input type="checkbox"/> Wood <input type="checkbox"/>	
	BASEMENT Full <input type="checkbox"/> Partial <input type="checkbox"/> Finished <input type="checkbox"/> Unfinished <input type="checkbox"/>	
	GARAGE TYPE Single <input type="checkbox"/> Double <input type="checkbox"/> Attached <input type="checkbox"/> Detached <input type="checkbox"/>	
	SEWER TYPE Municipal <input type="checkbox"/> Septic <input type="checkbox"/>	
	WATER SUPPLY Municipal <input type="checkbox"/> Well <input type="checkbox"/>	
PAVED ROADS _____		
CONDO HEATING TYPE _____		
PROPERTY CONDITION _____		
MLS NUMBER _____		
ANNUAL TAXES _____		
SQUARE FOOTAGE _____		
YEAR BUILT _____		
TOTAL ROOMS _____		
NUMBER of BEDROOMS _____		
HALF BATHROOMS _____		
FULL BATHROOMS _____		
NUMBER of FIREPLACES _____		
MONTHLY CONDO FEES _____		
SWIMMING POOL TYPE _____		
COPY of OFFER To Follow		
COPY of LISTING To Follow		
AUTHORIZATION	I/We authorize the receipt and exchange of information about me/us with your affiliates from time to time as you deem necessary and appropriate and to the sharing or exchange of reports and information with the various 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.	
	APPLICANT SIGNATURE *	CO-APPLICANT SIGNATURE *
	* DATED:	* DATED:
NOTES		