

# 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: (MMDDYYY	Y)* SIN:	E-MAIL ADDRESS:*	
MARITAL STATUS:			
CURRENT LIVING ADDRE	ESS		
NUMBER:*	STREET NAME:* UNIT #	: CITY/TOWN:*	
PROVINCE:*	POSTAL/ZIP CODE挡OME PH.#: (1)	.112223333)* CELL PH.#: (1112223333)	
FROVINCE.	FOSTAL/ZIF CODE NOME FIT.#. (II	12225355) CELL F11.#. (1112225355)	
TIME AT ADDRESS: (YYMM) (E	G. 4 YEARS & 2 MONTHS = 0402)*		
PREVIOUS ADDRESSES	(OPTIONAL; WITHIN THE LAST THREE YEARS)		
NUMBER:*	STREET NAME:* UNIT #	: CITY/TOWN:*	
PROVINCE:*	POSTAL/ZIP CODERESIDENTIAL S	STATUS*	
TIME AT ADDRESS: (YYMM) (E	G. 4 YEARS & 2 MONTHS = 0402)*		



# **PERSONAL INFORMATION - APPLICANT 1**

PRESENT EMPLOYER			
OCCUPATION TYPE:*	NAME OF EMPLOYER:*	JOB TITLE:*	WORK PH.#: (1112223333)
LENGTH OF EMPLOYMENT: (YYMM) (EG	i. 4 YEARS & 2 MONTHS = 0402)*  AN	INUAL INCOME:*	TYPE OF INCOME:*
PREVIOUS EMPLOYER (OF	PTIONAL; WITHIN THE LAST THREE	YEARS)	
OCCUPATION TYPE:*	NAME OF EMPLOYER:*	JOB TITLE:*	WORK PH.#: (1112223333)
LENGTH OF EMPLOYMENT: (YYMM) (EG	6. 4 YEARS & 2 MONTHS = 0402)*  AN	INUAL INCOME:*	TYPE OF INCOME:*

#### **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: (MMDDYY	YY)* SIN:	E-MAIL ADDRES	SS:*	
MARITAL STATUS:				
CURRENT LIVING ADDR	ESS			
NUMBER:*	STREET NAME:*	UNIT #: CITY/TOWI	N:*	
PROVINCE:*	POSTAL/ZIP CODI	E拧OME PH.#: (1112223333)*	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)
	TO THE OTE AND ESTER.	JOS IIIEE.	WORKT H.M. (IIIIZZZZZZZ	,,,,
LENGTH OF EMPLOYMENT	: (YYMM) (EG. 4 YEARS & 2 MONTHS = 0402)*	ANNUAL INCOME:*	TYPE OF INCOME:*	
PREVIOUS EMPLOYER	(OPTIONAL; WITHIN THE LAST THE	REE YEARS)		
OCCUPATION TYPE:*	NAME OF EMPLOYER:*	JOB TITLE:*	WORK PH.#: (111222333	33)
LENGTH OF EMPLOYMENT	: (YYMM) (EG. 4 YEARS & 2 MONTHS = 0402)*	ANNUAL INCOME:*	TYPE OF INCOME:*	

#### FINANCIAL INFORMATION

Α	S	S	Е	Т	S

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
	WHERE/FINANCIAL INSTITUTION(S)	BALANCE OWING	MONTHLY PAYMENTS
ТҮРЕ	WHERE/FINANCIAL INSTITUTION(S)	BALANCE OWING	MONTHLY PAYMENTS
TYPE  Debts/Loans	WHERE/FINANCIAL INSTITUTION(S)	BALANCE OWING	MONTHLY PAYMENTS
TYPE  Debts/Loans  Credit Cards	WHERE/FINANCIAL INSTITUTION(S)	BALANCE OWING	MONTHLY PAYMENTS
TYPE  Debts/Loans  Credit Cards  Amount owing on current mortgage(s)	WHERE/FINANCIAL INSTITUTION(S)	BALANCE OWING	MONTHLY PAYMENTS



NET WORTH (TOTAL ASSETS - TOTAL LIABILITIES) = \$

# **CURRENT MORTGAGES/PROPERTIES OWNED**

(LEAVE THIS SECTION BLANK IF YOU DO NOT WISH TO ENTER CURRENT MORTGAGE/PROPERTIES)

PROPERTY#1	
NUMBER:* STREET NAME:* UNIT #:	CITY/TOWN:*
PROVINCE:* POSTAL/ZIP CODEPROPERTY VALUE:*	RENTAL INCOME:
ALL FIELDS BELOW ARE REQUIRED IF YOU HAVE A CURRENT MORTGAGE*	
EXISTING MORTGAGE BANK/LENDER: MORTGAGE RATE %: MO	ONTHLY PAYMENTS: MORTGAGE BALANCE:
PROPERTY#2	
NUMBER:* STREET NAME:* UNIT #:	CITY/TOWN:*
PROVINCE:* POSTAL/ZIP CODE#PROPERTY VALUE:*	RENTAL INCOME:
ALL FIELDS BELOW ARE REQUIRED IF YOU HAVE A CURRENT MORTGAGE*	
EXISTING MORTGAGE BANK/LENDER: MORTGAGE RATE %: MO	DNTHLY PAYMENTS: MORTGAGE BALANCE:
PROPERTY#3	
NUMBER:* STREET NAME:* UNIT #:	CITY/TOWN:*
PROVINCE:* POSTAL/ZIP CODEPROPERTY VALUE:*	RENTAL INCOME:
ALL FIELDS BELOW ARE REQUIRED IF YOU HAVE A CURRENT MORTGAGE*	
EXISTING MORTGAGE BANK/LENDER: MORTGAGE RATE %: MO	ONTHLY PAYMENTS: MORTGAGE BALANCE:



#### **OTHER INFORMATION**

ADDITIONAL NOTE FOR FINANCIAL I	INFORMATION: (MAX. 500 CHARACTERS	S)			
	nformation given in the mortgage appl				
bureau) and each such source is he	e authorized to obtain any informatior reby authorized to provide you with su formation you obtain in relation to my	ıch informati	on. I/we also understand that th	ne information given in the mor	rtgage
and mortgage insurers, organizatio	ns providing technological or other su	pport service	es required in relation to this app	olication and any other parties	with whom
complete. I/we will pay all legal, pro	ationship. You may retain our applicat operty appraisal, registration, and othe	er costs or ex	penses incurred by you in conne	ection with this transaction. I/w	
acknowledge and agree that you m	ay be entitled to receive financial com	pensation w	th respect to a transaction from	a lender or other person.	
Online Applications					
Please read the paragraph above pr paragraph noted above.	rior to sending completed application.	By transmit	ting the online mortgage applica	ation you are accepting the ter	ms of the
CANADA'S ANTI-SPAM LEGISLAT	гіон				
	is effective as of July 1, 2014. Under this atest mortgage news, events, products,			nsent in order to continue send	ding you
PLEASE CONFIRM YOUR CONSENT T	TO RECEIVING ELECTRONIC COMMUNIC	CATIONS.*	YES	NO	
SIGNATURE REQUIRED IF THIS I	DOCUMENT IS PRINTED. NOT REQU	JIRED FOR (	ONLINE SUBMISSION.		
APPLICANT 1'S SIGNATURE:	DATE:		APPLICANT 2'S SIGNATURE:	DATE:	



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