



601 Mill Street | Port Elgin | Ontario | N0H 2C3

http://www.brianmill.ca

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**



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)		
ADDITIONAL NOTE FOR THANKS ALL	IN OKNIVITON. (III) W. 300 CIVITA CI EK			
my/our credit responsibility. You ar bureau) and each such source is he application form as well as other in and mortgage insurers, organizatio I/we propose to have a financial rel- complete. I/we will pay all legal, pro	e authorized to obtain any informatior reby authorized to provide you with su formation you obtain in relation to my	n you may re ich informati credit histor pport service ion and othe er costs or ex	quire for these purposes from ot on. I/we also understand that th y may be disclosed to potential es required in relation to this app r personal information whether penses incurred by you in conne	mortgage lenders, financial intermediar blication and any other parties with who or not any transaction is ultimately ection with this transaction. I/we also
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 terms of the
CANADA'S ANTI-SPAM LEGISLAT	TION			
	s effective as of July 1, 2014. Under thi			nsent in order to continue sending you
PLEASE CONFIRM YOUR CONSENT 1	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:



Brian Mill
Mortgage Agent Level 1

Fax: 1-888-788-4566 Mobile: 519-379-3003

Toll Free: 1-888-371-6177

601 Mill Street | Port Elgin | Ontario | N0H 2C3

http://www.brianmill.ca

