

# 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 INFORMA	ATION			
ADDITIONAL NOTE FOR FI	INANCIAL INFORMATION: (MAX. 500 CHARACT	TERS)		
my/our credit responsibil bureau) and each such so application form as well a and mortgage insurers, o I/we propose to have a fir complete. I/we will pay al	In that the information given in the mortgage a lity. You are authorized to obtain any informa ource is hereby authorized to provide you wit as other information you obtain in relation to rganizations providing technological or other nancial relationship. You may retain our appl Il legal, property appraisal, registration, and of	ntion you may r h such informa my credit histor r support servious ication and oth other costs or e	equire for these purposes from ot tion. I/we also understand that th ory may be disclosed to potential tes required in relation to this apper er personal information whether expenses incurred by you in conne	ther sources (including, for example, cred to information given in the mortgage mortgage lenders, financial intermediary plication and any other parties with whon or not any transaction is ultimately ection with this transaction. I/we also
acknowledge and agree t  Online Applications	hat you may be entitled to receive financial c	compensation v	vith respect to a transaction from	a lender or other person.
Please read the paragrap paragraph noted above.	h above prior to sending completed applicat	ion. By transmi	tting the online mortgage applica	ation you are accepting the terms of the
CANADA'S ANTI-SPAM	LEGISLATION			
	slation was effective as of July 1, 2014. Under bout the latest mortgage news, events, produ			nsent in order to continue sending you
PLEASE CONFIRM YOUR C	CONSENT TO RECEIVING ELECTRONIC COMMU	JNICATIONS.*	YES	NO
SIGNATURE REQUIRED	IF THIS DOCUMENT IS PRINTED. NOT RE	EQUIRED FOR	ONLINE SUBMISSION.	
APPLICANT 1'S SIGNATUR	RE: DATE:		APPLICANT 2'S SIGNATURE:	DATE:
	Colin Mason Mortgage Broker			
	Mobile: 4166766777			
	290 Toronto Street South   Uxb	ridge   Onta	ario   L9P 0C6	
	http://www.colinmasonTMD.co	<u>om</u>		

