

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: | | | |
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| | | | |
| 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

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|---|---|---|---|---|---|
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| 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: |
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| ADDITIONAL NOTE FOR FINANCIAL | INFORMATION: (MAX. 500 CHARACTERS | 5) | | | |
|--|---|--|--|---|--|
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| 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 | nformation given in the mortgage applie authorized to obtain any information reby authorized to provide you with suformation you obtain in relation to myons providing technological or other sufationship. You may retain our applicationerty appraisal, registration, and other and be entitled to receive financial compary. | n you may re ch informati credit histor oport service ion and othe er costs or ex | quire for these purposes from othe on. I/we also understand that the ry may be disclosed to potential mes required in relation to this appli or personal information whether of penses incurred by you in connec- | er sources (including, for example information given in the mortgag ortgage lenders, financial intermication and any other parties with rinot any transaction is ultimately tion with this transaction. I/we al | e, credi ge nediary h whom y |
| Online Applications | | | | | |
| Please read the paragraph above p paragraph noted above. | rior to sending completed application. | By transmit | ting the online mortgage applicati | on you are accepting the terms o | of the |
| CANADA'S ANTI-SPAM LEGISLAT | TION | | | | |
| | ns effective as of July 1, 2014. Under this atest mortgage news, events, products, | | | ent in order to continue sending | you |
| PLEASE CONFIRM YOUR CONSENT | TO RECEIVING ELECTRONIC COMMUNIC | CATIONS.* | YES | NO | |
| | | | | | |
| SIGNATURE REQUIRED IF THIS | DOCUMENT IS PRINTED. NOT REQU | IRED FOR | ONLINE SUBMISSION. | | |
| APPLICANT 1'S SIGNATURE: | DATE: | | APPLICANT 2'S SIGNATURE: | DATE: | |
| | | | | | |



Jill Gruen
Mortgage Broker

Tel: 2504691040

213-810 Clement Avenue | Kelowna | British Columbia | V1Y 0J7

http://jillgruen.com

