

How did you hear about us: _____

		APPLICANT			CO-APPLICANT			
PERSONAL	First Name							
	Last Name	Initial: _____			Initial: _____			
	Home Tel.	() _____			() _____			
	Work Tel.	() _____			() _____			
	Cell.	() _____			() _____			
	Birth Date			No. of Dependents			No. of Dependents	
	S.I.N.						(Exc. Spouse)	
	Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Common: Yrs ____ <input type="checkbox"/> Other: _____			<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Common: Yrs ____ <input type="checkbox"/> Other: _____			
	Current Add.							
	Current Add.							
City/Province								
Postal Code								
	<input type="checkbox"/> Own <input type="checkbox"/> Rent No. of Years: _____		<input type="checkbox"/> Own <input type="checkbox"/> Rent No. of Years: _____					
If you have lived at your current address for less than 3 Yrs, complete previous address information								
	Previous Add.							
	Previous Add.							
	City/Province							
	Postal Code							
		<input type="checkbox"/> Own <input type="checkbox"/> Rent No. of Years: _____		<input type="checkbox"/> Own <input type="checkbox"/> Rent No. of Years: _____				
EMPLOYMENT & INCOME	Curr. Employer Address							
	City/Province							
	Postal Code							
	Occupation	Yrs of Service: _____		Yrs of Service: _____				
	Annual Income	\$ _____		\$ _____				
	If you have worked at your current employment for less than 3 Yrs, complete previous employment information							
		Prev. Employer Address						
		City/Province						
		Postal Code						
		Occupation	Yrs of Service: _____		Yrs of Service: _____			
	Annual Income	\$ _____		\$ _____				
Other Income (Please Specify)								
		Description	How Long	Amount	Description	How Long	Amount	
	eg. Pension, Part Time, Alimony, Support, Investment, Rental Income, etc.							
		Total Other Income \$			Total Other Income \$			

CAR / BOAT / RV	Type	Year	Make	Ownership	PMT/MO.	Value	Owing	Lender
				<input type="checkbox"/> Own <input type="checkbox"/> Loan <input type="checkbox"/> Lease	\$	\$	\$	
				<input type="checkbox"/> Own <input type="checkbox"/> Loan <input type="checkbox"/> Lease	\$	\$	\$	
				<input type="checkbox"/> Own <input type="checkbox"/> Loan <input type="checkbox"/> Lease	\$	\$	\$	
				<input type="checkbox"/> Own <input type="checkbox"/> Loan <input type="checkbox"/> Lease	\$	\$	\$	
				Total:				

ASSETS		Value	Comments
	Pri. Residence Value	\$	
	Rental Prop. Value	\$	
	Cash in Chequing Acc.	\$	
	Cash in Savings Acc.	\$	
	Term Deposits / GIC's	\$	
	Stocks & Bonds	\$	
	Mutual Funds	\$	
	RRSP's	\$	
Other	\$		

LIABILITIES	Type	Institution	PMT/MO.	Comments	Applicant	Co-Applicant	

Total Debt. \$

Questions

- If you are purchasing a home, will the property be Owner Occupied? Yes No
- If you are purchasing a home, what type of property is it?
 Raw Land Single Family Duplex Apt. Condo TownH. Other _____
- What is the value of the property? \$ _____ Estimated Appraised Selling Price
- What is the source of your downpayment? Own Money Gifted 2nd Financing Other: _____

Client Requests: (Please list any special requests, for example "pre payment options", "line of credit options" etc.)

Credit Bureau: (This form is also available on our webs site)

In order for us to proceed with your application it is a requirement for us to pull a credit bureau. The contents the credit bureau is then reviewed with you, confidentially, in order to ensure there are no errors or emissions.

Please let us know how you would like this one page consent form sent to you:

Via Fax: (____) - ____ - _____ Via Email: _____