

Referral: _____

Applicant Information:

Full Name		S.I.N.	Date of Birth	Dependants	Marital Status
Present Address			Postal Code	Rent/Own \$	No. Of Years
Previous Address: <i>(if less than 3 years at current)</i>				Rent/Own \$	No. Of Years
Home Phone:		Home Fax:		Cellular:	
Bus Phone:		Bus Fax:		Email:	
Current Employer		Years	Gross Annual Income	Occupation	
Address:					
Previous Employer: <i>(if less than 3)</i>		Years	Gross Annual Income	Occupation	
1					
Employer Address:					
Previous Employer: <i>(if less than 3)</i>		Years	Gross Annual Income	Occupation	
2					
Employer Address:					
Other Income: Source		Years	Income	Occupation	
Smoker? <input type="checkbox"/> Yes <input type="checkbox"/> No First Time Buyer? <input type="checkbox"/> Yes <input type="checkbox"/> No					

Co-Applicant Information:

Full Name		S.I.N.	Date of Birth	Marital Status	
Address			Postal Code	Yrs	
Home Phone:		Home Fax:		Cellular:	
Business Phone:		Bus Fax:		Email:	
Current Employer		Years	Gross Annual Income	Occupation	
Previous Employer: <i>(if less than 3 years at current)</i>		Years	Gross Annual Income	Occupation	
1					
2					
Other Income		Years	Gross Annual Income	Occupation	
Smoker? <input type="checkbox"/> Yes <input type="checkbox"/> No First Time Buyer? <input type="checkbox"/> Yes <input type="checkbox"/> No					

Assets:

Bank:	Location:	Type:	Balance: \$
Bank:	Location:	Type:	Balance: \$
RRSP:			Value: \$
Stocks/Bonds/GIC:			Value: \$
Automobile:			Value: \$
Automobile:			Value: \$
Other Assets:			Value: \$
Other Assets:			Value: \$

Other Assets:	Value: \$
Household Goods:	Value: \$

Liabilities:

Bank Loan/LOC	Balance: \$	Payment: \$	
Bank Loan/LOC	Balance: \$	Payment: \$	
Bank Loan/LOC	Balance: \$	Payment: \$	
Credit Card	Type:	Balance: \$	Payment: \$
Credit Card	Type:	Balance: \$	Payment: \$
Credit Card	Type:	Balance: \$	Payment: \$
Credit Card	Type:	Balance: \$	Payment: \$
Other Debt:	Balance: \$		
Other Debt:	Balance: \$		

Current Mortgages/Properties Owned:

Address:			Property Value: \$
Existing Mortgage Bank/Lender:			First: Second:
Mortgage Rate: %	Monthly Payments: \$	Rental Income: \$	Mortgage Balance: \$
Address:			Property Value: \$
Existing Mortgage Bank/Lender:			First: Second:
Mortgage Rate: %	Monthly Payments: \$	Rental Income: \$	Mortgage Balance: \$
Address:			Property Value: \$
Existing Mortgage Bank/Lender:			First: Second:
Mortgage Rate: %	Monthly Payments: \$	Rental Income: \$	Mortgage Balance: \$

New Property Information

Address:		Block/Plan:
		Square Footage:
		Lot Size:
Building Type:	Condo/ Freehold:	Age of Home:
Annual Taxes:	Condo Fees:	Garage : Attached Detached
Requested Mortgage Amount: \$		
Purchase Price or current Balue: \$		
Down Payment Amount: \$		
Closing Date:		

I/We warrant and confirm that the information given in the mortgage application form is true and correct and I/We understand that it is being used to determine my/our credit responsibility. I/We authorize KEY MORTGAGE PARTNERS - Dominion Lending Centres to obtain and/or exchange personal information with any personal information agent towards establishing or verifying my financial standing. You are furthermore authorized to disclose, in response to direct enquiries from any other lender or credit bureau, such information on my loaning account as you consider appropriate, and I agree to indemnify you against and save you harm from any and all claims in damages or otherwise arising from such disclosure on your part. You are also authorized to retain the application whether or not the relative mortgage is approved.

Signature:
Signature:

Date:
Date:

Verbal Consent - By Broker

Date:

Notes:
