

TMG ATLANTIC MORTGAGE APPLICATION



broker		company	
street		city	
province		postal code	
phone	fax	email	
toll free fax	toll free phone	cellphone	

PERSONAL INFORMATION (client)

PRINCIPAL APPLICANT

Title Mr. Mrs. Ms. Miss.

First Name

Middle Name

Last Name

Date of Birth

SIN

Marital Status Married Single Divorced

Number of Dependants

CURRENT ADDRESS

Street

City

Province

Postal Code

Years There

Own

Rent

Monthly Payment/Rent

Home Phone

Cellphone

Work Phone

Email

If less than 3 years, please provide your previous address

Street

City

Province

Postal Code

Years There

Owned

Rented

CO-APPLICANT (if necessary)

Title Mr. Mrs. Ms. Miss.

First Name

Middle Name

Last Name

Date of Birth

SIN

Marital Status Married Single Divorced

Number of Dependants

CURRENT ADDRESS

Street

City

Province

Postal Code

Years There

Own

Rent

Monthly Payment/Rent

Home Phone

Cellphone

Work Phone

Email

If less than 3 years, please provide your previous address

Street

City

Province

Postal Code

Years There

Owned

Rented

EMPLOYMENT INFORMATION

PRINCIPAL APPLICANT

Current Employer

City

Province

Position

Income Type Salary Contract Self

Annual Income

Years There

If less than 3 years, please provide your previous address

Previous Employer

City

Province

Position

Income Type Salary Contract Self

Years There

Other Sources of Income

Description

Amount

CO-APPLICANT

Current Employer

City

Province

Position

Income Type Salary Contract Self

Annual Income

Years There

If less than 3 years, please provide your previous address

Previous Employer

City

Province

Position

Income Type Salary Contract Self

Years There

Other Sources of Income

Description

Amount

ASSETS

PRINCIPAL APPLICANT

Balance

Savings Account Balance

Chequing Account Balance

RRSP Balance

Stocks/Bonds

Vehicle(s) Value

Residence

Other Real Estate

Other

Name of Bank

CO- APPLICANT

Balance

Savings Account Balance

Chequing Account Balance

RRSP Balance

Stocks/Bonds

Vehicle(s) Value

Residence

Other Real Estate

Other

Name of Bank

LIABILITIES

PRINCIPAL APPLICANT

Balance (monthly)

CO- APPLICANT

Balance (monthly)

Mortgage

Mortgage

Credit Cards (*all cards*)Credit Cards (*all cards*)

RRSP Loan

RRSP Loan

Automobile Loan(s)

Automobile Loan(s)

Bank Loan(s)

Bank Loan(s)

Residence

Residence

Other

Other

Other

Other

Other

Other

Name of Bank

Name of Bank

SIGNATURES

Signature of Applicant

Date

Signature of Co-Borrower
(if applicable)

Date

We hereby certify that the information given in my/our mortgage application is complete, correct and is given for the purpose of obtaining the mortgage loan and/or financial services applied for.

I/We authorize the receipt and exchange of information about me/us with your affiliates from time to time as you deem appropriate and to the sharing or exchange of reports and information with the credit reporting agencies, credit bureaus, mortgage insurers, and/or any other person, corporation, firm or enterprise with whom I/We have or propose to have a financial relationship.