



Mortgage Application

Ric Lazare
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- Purchase
- Refinance
- Renewal
- Pre-Approval

Applicant Information:

Full Name:			Date of Birth:		Social Insurance Number:		
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Seperated <input type="checkbox"/> Divorced <input type="checkbox"/> Common Law <input type="checkbox"/> Other						Number of Dependents:	
Current Address:			City/Town:		Province:	Postal Code:	How Long:
Previous Address (if less than 3 years at current address)			City/Town:		Province:	Postal Code:	How Long:
Do you: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other		If Rent: \$	Home Phone:		Mobile:		Fax:
Email Address:				Website (if applicable):			
Current Employer:			Time with Employer:		Occupation:		Time in Industry:
Income Type: <input type="checkbox"/> Salary <input type="checkbox"/> Hourly <input type="checkbox"/> Commission <input type="checkbox"/> Self Employed <input type="checkbox"/> Contract				Rate:	Gross Annual Income:		Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Employer Address:					Employer Phone Number:		
Previous Employer (If less than 3 years)			Time with Employer:		Occupation:		Time in Industry:
Income Type: <input type="checkbox"/> Salary <input type="checkbox"/> Hourly <input type="checkbox"/> Commission <input type="checkbox"/> Self Employed <input type="checkbox"/> Contract				Rate:	Gross Annual Income:		Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Employer Address:					Employer Phone Number:		

Co-Applicant Information:

Full Name:			Date of Birth:		Social Insurance Number:		
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Seperated <input type="checkbox"/> Divorced <input type="checkbox"/> Common Law <input type="checkbox"/> Other						Number of Dependents:	
Current Address:			City/Town:		Province:	Postal Code:	How Long:
Previous Address (if less than 3 years at current address)			City/Town:		Province:	Postal Code:	How Long:
Do you: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other		If Rent: \$	Home Phone:		Mobile:		Fax:
Email Address:				Website (if applicable):			
Current Employer:			Time with Employer:		Occupation:		Time in Industry:
Income Type: <input type="checkbox"/> Salary <input type="checkbox"/> Hourly <input type="checkbox"/> Commission <input type="checkbox"/> Self Employed <input type="checkbox"/> Contract				Rate:	Gross Annual Income:		Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Employer Address:					Employer Phone Number:		
Previous Employer (If less than 3 years)			Time with Employer:		Occupation:		Time in Industry:
Income Type: <input type="checkbox"/> Salary <input type="checkbox"/> Hourly <input type="checkbox"/> Commission <input type="checkbox"/> Self Employed <input type="checkbox"/> Contract				Rate:	Gross Annual Income:		Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Employer Address:					Employer Phone Number:		

Employment Notes (Office Use Only)

Assets:

Bank Account:	Institution:	Value:
Bank Account:	Institution:	Value:
Stocks/Bonds/Mutual:	Institution:	Value:
RRSP:	Institution:	Value:
Automobile:	Year / Make / Model:	Value:
Automobile:	Year / Make / Model:	Value:
Household Good:	Description:	Value:
Other:	Description:	Value:
Other:	Description:	Value:

Liabilities:

Bank Loan/Credit Line:	Institution:	Balance:	Monthly Payment:
Bank Loan/Credit Line:	Institution:	Balance:	Monthly Payment:
Credit Card:	Institution:	Balance:	Monthly Payment:
Credit Card:	Institution:	Balance:	Monthly Payment:
Credit Card:	Institution:	Balance:	Monthly Payment:
Car Loan:	Institution:	Balance:	Monthly Payment:
Other:	Description:	Balance:	Monthly Payment:
Other:	Description:	Balance:	Monthly Payment:

Assets and Liabilities Notes (Office Use Only)

Current Mortgages & Properties Owned:

Property #1:

Address:									
Value:		Purchase Date:			Purchase Price:			Age:	
Requested Mortgage Amount:		Requested Term:			Requested Amortization:		Requested Payment Frequency:		
Closing Date:		Financing Waiver:		Down-Payment Amount:		Down-Payment Source: <input type="checkbox"/> Savings <input type="checkbox"/> RRSP <input type="checkbox"/> Gifted <input type="checkbox"/> Borrowed <input type="checkbox"/> Other			
Dwelling Type:		Living Space (Sq Ft):			Lot Size (Sq Ft):		# of Units:		
Heat Type:		# of Levels:		Garage Type:			Garage Size:		
Annual Taxes:		Paid By: <input type="checkbox"/> Borrower <input type="checkbox"/> Lender			Heating Costs:		Strata Fees:		
Existing Lender:		Existing Amount:			Existing Rate:		Existing Term:		
Original Amount Borrowed:			Existing Amortization:		Existing Frequency:		Existing Payment:		Expiry Date:
Mortgage Account No.:			Insured: <input type="checkbox"/> CMHC <input type="checkbox"/> Genworth <input type="checkbox"/> AIG <input type="checkbox"/> N/A				Insurance Account #:		
Rental Income:		Tenancy Agreement in Place: <input type="checkbox"/> Yes <input type="checkbox"/> No		# of Authorized suites:			# of Unauthorized suites:		

Property #2:

Address:									
Value:		Purchase Date:			Purchase Price:			Age:	
Requested Mortgage Amount:		Requested Term:			Requested Amortization:		Requested Payment Frequency:		
Closing Date:		Financing Waiver:		Down-Payment Amount:		Down-Payment Source: <input type="checkbox"/> Savings <input type="checkbox"/> RRSP <input type="checkbox"/> Gifted <input type="checkbox"/> Borrowed <input type="checkbox"/> Other			
Dwelling Type:		Living Space (Sq Ft):			Lot Size (Sq Ft):		# of Units:		
Heat Type:		# of Levels:		Garage Type:			Garage Size:		
Annual Taxes:		Paid By: <input type="checkbox"/> Borrower <input type="checkbox"/> Lender			Heating Costs:		Strata Fees:		
Existing Lender:		Existing Amount:			Existing Rate:		Existing Term:		
Original Amount Borrowed:			Existing Amortization:		Existing Frequency:		Existing Payment:		Expiry Date:
Mortgage Account No.:			Insured: <input type="checkbox"/> CMHC <input type="checkbox"/> Genworth <input type="checkbox"/> AIG <input type="checkbox"/> N/A				Insurance Account #:		
Rental Income:		Tenancy Agreement in Place: <input type="checkbox"/> Yes <input type="checkbox"/> No		# of Authorized suites:			# of Unauthorized suites:		

Property & Mortgage Notes (Office Use Only)
