

Mortgage Pre-Approval



Applicant Information

<input type="checkbox"/> Mr <input type="checkbox"/> Mrs First name			Initial			Last name			Social Insurance Number			
<input type="checkbox"/> Ms <input type="checkbox"/> Miss												
Marital status						Number of dependents			Date of birth (example: January 31, 1970)			
<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Common Law						<input type="checkbox"/> None						
Current address						City/Town			Province		Postal code	
Previous address (if at current for less than 3 years)						City/Town			Province		Postal code	
Residential status			Home telephone			Work telephone			Fax			
<input type="checkbox"/> Live with family			()			()						
<input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other												
Current employer						Occupation			Years there		Gross yearly income \$	
Current employer address						City/Town			Province		Postal code	
Email address (optional)						Source of other income (if any)			Other yearly income \$			
Previous employer (if at current for less than 3 years)						Occupation			Years there		Gross yearly income \$	

Co-Applicant Information

Fill out this section if you are married or have a co-applicant.

<input type="checkbox"/> Mr <input type="checkbox"/> Mrs First name			Initial			Last name			Social Insurance Number			
<input type="checkbox"/> Ms <input type="checkbox"/> Miss												
Relationship to co-applicant						Number of dependents			Date of birth (example: January 31, 1970)			
<input type="checkbox"/> Spouse <input type="checkbox"/> Parent <input type="checkbox"/> Relative <input type="checkbox"/> Friend <input type="checkbox"/> Other						<input type="checkbox"/> None						
Current address						City/Town			Province		Postal code	
Residential status			Home telephone			Work telephone			Fax (optional)			
<input type="checkbox"/> Live with family			()			()						
<input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other												
Current employer						Occupation			Years there		Gross yearly income \$	
Current employer address						City/Town			Province		Postal code	
Email address (optional)						Source of other income (if any)			Other yearly income \$			

Details of Mortgage Loan

If you are unsure of the financing you need or unfamiliar with all your options, leave those pertaining sections blank.

Mortgage amount needed \$	Term (current rates on website)	Amortization						Re-payment frequency				
	Variable <input type="checkbox"/> 5yr Fixed <input type="checkbox"/> 6mth	<input type="checkbox"/> 1yr	<input type="checkbox"/> 3yr	<input type="checkbox"/> 5yr	<input type="checkbox"/> 10yr	<input type="checkbox"/> 18yr	years	<input type="checkbox"/> Weekly	<input type="checkbox"/> Semi-monthly	<input type="checkbox"/> Bi-weekly	<input type="checkbox"/> Monthly	
Purchase Price (if applicable) \$	Downpayment (if applicable) \$	Downpayment source (if applicable)					Purchase date (if applicable)					
		<input type="checkbox"/> Savings	<input type="checkbox"/> RRSP	<input type="checkbox"/> Gift	<input type="checkbox"/> Sale of Property							
Property address (if applicable)						City/Town			Province		Postal code	

Assets and Liabilities

Assets	Current Value	Liabilities	Current Balance	Monthly Payments
Cash and savings	\$	Credit cards	\$	\$
Property	\$	Rent/Mortgage payments	\$	\$
RRSP	\$	Personal loans/Lines of credit	\$	\$
Stocks and bonds	\$	Support/Alimony payments	\$	\$
Vehicles	\$	Car payments	\$	\$
Other:	\$	Other:	\$	\$
Total Assets	\$	Total Liabilities	\$	\$

Property Information Required By CMHC

Fill out this section only if you are buying a home and do not have a minimum of 25% down.

Dwelling type			Property age			Tenure		
<input type="checkbox"/> Detached <input type="checkbox"/> Semi detached <input type="checkbox"/> Townhouse <input type="checkbox"/> Duplex <input type="checkbox"/> Triplex <input type="checkbox"/> Highrise						<input type="checkbox"/> Freehold <input type="checkbox"/> Condo		
Dwelling style			Square footage			Garage type		
<input type="checkbox"/> One storey <input type="checkbox"/> Bi level <input type="checkbox"/> Two storey <input type="checkbox"/> Split level <input type="checkbox"/> Storey and a half <input type="checkbox"/> Three storey						<input type="checkbox"/> Attached <input type="checkbox"/> Detached		
Heating Type			Lot size			Garage size		
<input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Hot water <input type="checkbox"/> Fireplace <input type="checkbox"/> Space heater <input type="checkbox"/> Wood Stove						<input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple		

I hereby authorize the Canadian Equity Group to obtain a credit report and/or to make any necessary inquiries regarding our mortgage application and/or to release this information to any lenders who may be interested in providing funds on your behalf as stated in the Ontario Equity privacy policy. Our privacy policy is available at www.ontarioequity.com or by calling toll free 1-888-818-4262.

Applicant's Signature: X Co-Applicant's Signature: X Date: _____

Please return via facsimile 1-888-312-4262

