

Applicant's Surname	First Name and Initial	Date of Birth	
		Mo. Day Year	

NOTE: Complete if less than 3 yrs. at current employer and/or current address

Street Address	How long?	Rent/Mtg. Pmt	Applicant's Previous Address	How Long?
City	Prov.	Postal Code	Res. Phone No.	
Co-Applicant's Surname			Co-Applicant's Previous Address	
First Name and Initial			How Long?	
Date of Birth			Applicant's Previous Employer	
Mo. Day Year			Occupation	
Street Address			Applicant's Previous Employer	
How long?			Occupation	
Rent/Mtg. Pmt			How Long?	
\$			Co-Applicant's Previous Employer	
City			Occupation	
Prov.			How Long?	
Postal Code				
Res. Phone No.				

Applicant Employed by:	Phone (work)	How Long?	<b>LIFE INSURANCE SECTION</b>	
Occupation			Interested in Mortgage Life, Disability, Loss of Employment & Critical Illness Insurance Coverage? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Co-Applicant Employed by:			Applicant Non-Smoker <input type="checkbox"/> Smoker <input type="checkbox"/>	
Phone (work)			Co-Applicant Non-Smoker <input type="checkbox"/> Smoker <input type="checkbox"/>	
How Long?				
yrs mo.				
Occupation				

Social Insurance Number	Applicant	Co-Applicant	<b>YOUR LAWYER</b>	
			Law Firm: _____	
			Solicitor's Name: _____	
			Address: _____	
			Phone #: _____ Fax #: _____	
Marital Status	Number of Dependents _____			

<b>APPROXIMATE MONTHLY INCOME BEFORE DEDUCTIONS</b> <b>ATTACH LATEST TAX RETURN OR INCOME VERIFICATION FORM</b>	<b>OTHER INFORMATION</b>
Applicant's Income \$ _____	Have you or your spouse ever: been sued? <input type="checkbox"/> filed bankruptcy? <input type="checkbox"/>
Co-Applicant's Income \$ _____	OPD? <input type="checkbox"/>
App. other income (specify) \$ _____	Are you a co-maker, endorser or guarantor for anyone? Yes <input type="checkbox"/> No <input type="checkbox"/>
Co-App. other income ( " ) \$ _____	If yes, for whom? _____
<b>TOTAL MONTHLY INCOME</b> \$ _____	Payments _____ Approx. Balance: _____

<b>LIST YOUR PRESENT ASSETS</b>	<b>LIST YOUR PRESENT DEBTS (credit cards, child support, alimony, etc.)</b>		
		Approx. Bal. Owng	Monthly Pmt
Downpayment \$ _____	Mortgage Loan	\$ _____	\$ _____
Cash and/or savings (excluding downpayment) \$ _____	Mortgage Loan	\$ _____	\$ _____
Principal Residence \$ _____	Loan or Credit Card	\$ _____	\$ _____
Other Property Owned \$ _____	Loan or Credit Card	\$ _____	\$ _____
Automobile(s), Yr / Model \$ _____	Loan or Credit Card	\$ _____	\$ _____
Household Goods \$ _____	Loan or Credit Card	\$ _____	\$ _____
RRSP/Pension Plan (Specify) \$ _____	Support/Alimony	\$ _____	\$ _____
Investments \$ _____	Other (Please Specify)	\$ _____	\$ _____
Other 1 \$ _____	Other (Please Specify)	\$ _____	\$ _____
Other 2 \$ _____			
<b>TOTAL ASSETS</b> \$ _____	<b>TOTAL DEBTS</b>	\$ _____	\$ _____

**PURPOSE OF MORTGAGE (SPECIFY):** \_\_\_\_\_

<b>COSTS</b>	<b>SOURCE OF FUNDS</b>	<b>MORTGAGE DETAILS</b>
Purchase Price/Value \$ _____	Cash \$ _____	Term requested _____ Amortization requested _____
Land \$ _____	Land \$ _____	Payment _____
Construction \$ _____	Sweat Equity \$ _____	Frequency 1st Month ___ 15th Month ___ Bi-weekly ___ Weekly ___
Payout/Consolidation \$ _____	Equity in Ppty \$ _____	Interest Rate * _____ % * Subject to change
Renovation Costs, if applicable \$ _____	Gift \$ _____	Payment _____ Ppty Taxes _____ Total Pmt _____
Fees, if applicable \$ _____	Other \$ _____	
<b>TOTAL COSTS</b> \$ _____	<b>TOTAL EQUITY</b> \$ _____	

**TOTAL COSTS LESS (-) TOTAL EQUITY EQUALS (=) TOTAL AMOUNT BEING REQUESTED: \$ \_\_\_\_\_**

**LIST REFERENCES: (Preferably Relatives)**

Name	Relationship to Applicant	Address
1)		
2)		
3)		

**NEW CONSTRUCTION**

CONSTRUCTION WILL BE BY:  Self  Contract

NAME OF CONTRACTOR \_\_\_\_\_

ESTIMATED VALUE ON COMPLETION: \$ \_\_\_\_\_

ESTIMATED COMPLETION DATE: \_\_\_\_\_

**ATTACH COPY OF BUILDING PLANS, COST LIST, SPECIFICATIONS SHEET, BUILDING CONTRACTS, ETC.**

**PURCHASE**

Vendor \_\_\_\_\_ Phone No. \_\_\_\_\_

Real Estate Co. \_\_\_\_\_ Phone No. \_\_\_\_\_

Age of Building \_\_\_\_\_ Yrs.

Estimated Market Value \$ \_\_\_\_\_

Closing date of Sale \_\_\_\_\_

Home will be  Owner Occupied  Rented Rental Income \$ \_\_\_\_\_

**ATTACH COPY OF AGREEMENT OF PURCHASE & SALE AND A RECENT PHOTO OF THE PROPERTY**

**PARTICULARS OF LAND AND/OR BUILDING**

Location - Number - Street		Tax District		
City - County - Province		Taxes \$	Arrears \$	Liens
Size of lot	Size of Building	Assessment	Date of Last Assessment	Property Number

No of units in building \_\_\_\_\_

**DISCLOSURE:** Each applicant will receive, by default, independent and separate disclosure of all correspondence, notices and documentation with respect of this application by mail at the address first indicated above unless either party nominates a different address below:

Applicant's new disclosure address if different from that recorded above: \_\_\_\_\_

Co-Applicant's new disclosure address if different from that recorded above: \_\_\_\_\_

**OPTIONAL JOINT DISCLOSURE:** If the applicants wish to receive single joint disclosure, then each applicant must initial below where initialing indicates your consent, where such consent is revokable at any time by either applicant contacting League Savings and Mortgage at the office recorded above, to the receipt of single joint disclosure in the manner nominated below. If no nomination is recorded, and the Applicant and Co-Applicant have initialled their consent, then joint disclosure will be made in the name of the Applicant at the Applicant's address first recorded above. Incomplete nomination or initialing invalidates this option resulting in individual and separate disclosure.

_____ Applicant	_____ Nominate Recipient	_____ Nominate Address
Initial here		
_____ Co-Applicant	_____ Nominate Recipient	_____ Nominate Address
Initial here		

I/We acknowledge "that the granting of the Loan or any part thereof or approval for insurance by CMHC is not to be construed or relied on by the borrower(s) and any guarantor(s) as representing a confirmation of the value or condition of the underlying property, whether or not appraisals or inspections are carried out by or for CMHC; nor is it to be construed or relied on by the borrower(s) or any guarantor(s) as representing a confirmation of the borrowers(s) and any guarantor(s) ability to pay the Loan." All information obtained from or concerning the borrower(s) and any guarantor(s) in connection with approving the Loan, including credit information, will be accessible to and may be used by CMHC and League Savings and Mortgage for any purpose related to the provision of Loan Insurance generally; the borrower(s) or any guarantor(s) hereby consent thereto. Any information retained by CMHC in that regard will be subject to Federal access to information and privacy legislation.

I/We apply for a mortgage in the amount set out above. In consideration of League Savings and Mortgage Company making the loan, I/we agree to pay all fees and disbursements incurred by the Company in processing the application, and cost of investigating title. I/We certify that the statements contained in this application are true and correct and that any misstatement of fact contained herein shall entitle the Company to cancel the loan and demand repayment of the monies advanced and expenses incurred.

I confirm that I have read and signed the "Consent and Authorization to Use Personal Information" (Form A115) and have included it as part of this application.

Dated \_\_\_\_\_ APPLICANT: \_\_\_\_\_

WITNESS: \_\_\_\_\_ CO-APPLICANT: \_\_\_\_\_

**THIS SECTION MUST BE COMPLETED BY YOUR CREDIT UNION BEFORE SUBMITTING YOUR APPLICATION**

**APPLICANT JOINED** \_\_\_\_\_ CREDIT UNION IN \_\_\_\_\_ (date)

**CO-APPLICANT JOINED** \_\_\_\_\_ CREDIT UNION IN \_\_\_\_\_ (date)

Are loan repayments regular? \_\_\_\_\_ Are savings deposits regular? \_\_\_\_\_ Previous experience \_\_\_\_\_

**Additional comments which might assist us in making a fair decision**

**PRIVACY**

Applicant(s) must read and sign League Savings and Mortgage Form A115 "Consent and Authorization to Use Personal Information". The form must be returned to League Savings and Mortgage along with the mortgage application.

Attached Yes  No  If no, explain: \_\_\_\_\_

**ASCERTAINING IDENTITY**

Credit Union must ascertain the identify of Applicant(s) in accordance with League Savings and Mortgage's policies and procedures by completing Form G37(I), "Ascertaining Identity" and submit the completed information along with the mortgage application.

Attached Yes  No  If no, explain: \_\_\_\_\_

**I RECOMMEND THIS APPLICATION BE APPROVED / REJECTED**

\_\_\_\_\_ Date \_\_\_\_\_ Authorized Credit Union Employee