



Applicant's Surname	First Name and Initial	Date of Birth	NOTE: Complete if less than 3 yrs. at current employer and/or current address
		Mo. Day Year	

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

Street Address	How long?	Rent/Mtg. Pmt	Applicant's Previous Employer	Occupation	How Long?
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City	Prov.	Postal Code	Res. Phone No.	Co-Applicant's Previous Employer	Occupation	How Long?
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Applicant Employed by:	Phone (work)	How Long?	LIFE INSURANCE SECTION		
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Occupation	Interested in Mortgage Life, Disability, Loss of Employment & Critical Illness Insurance Coverage?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Co-Applicant Employed by:	Phone (work)	How Long?	Applicant	Non-Smoker <input type="checkbox"/>	Smoker <input type="checkbox"/>
		yrs mo.			

Co-Applicant Employed by:	Phone (work)	How Long?	Co-Applicant	Non-Smoker <input type="checkbox"/>	Smoker <input type="checkbox"/>
		yrs mo.			

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

APPROXIMATE MONTHLY INCOME BEFORE DEDUCTIONS ATTACH LATEST TAX RETURN OR INCOME VERIFICATION FORM	OTHER INFORMATION
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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? _____
TOTAL MONTHLY INCOME	\$	Payments _____ Approx. Balance: _____

LIST YOUR PRESENT ASSETS	LIST YOUR PRESENT DEBTS (credit cards, child support, alimony, etc.)
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	\$		Approx. Bal. Owing	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	\$			
TOTAL ASSETS	\$	TOTAL DEBTS	\$	\$

PURPOSE OF MORTGAGE (SPECIFY): _____

COSTS	SOURCE OF FUNDS	MORTGAGE DETAILS
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	
TOTAL COSTS	TOTAL EQUITY	

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