



**To:** Audrey Kurek  
Fax number: 1-888-470-2765

# FAX

**CONFIDENTIAL**

FOR REVIEW

**Date:**

**Regarding:** Mortgage Application

**Comments:**



Audrey Kurek, Mortgage Associate  
 Phone: 403-247-9770  
 Toll Free: 1-877-374-1233  
 Fax: 1-888-470-2765

**Principal Borrower**

**Co-Borrower**

Title	First name	Mid Initial
Last Name		Suffix
Birth Date Month Day Year		
SIN #		
Home Phone		Work Phone
Present Address (If less than 3 years include previous address on additional page)		
City		Province
Postal Code	Rent or Own	Years There

Title	First name	Mid Initial
Last Name		Suffix
Birth Date Month Day Year		
SIN #		
Home Phone		Work Phone
Present Address (If less than 3 years include previous address on additional page)		
City		Province
Postal Code	Rent or Own	Years There

**Marital Status**     Married     Single     Div./Sep  
 Common Law     Engaged     Widowed

Number of Dependents (Excluding Spouse) \_\_\_\_\_

**Relationship To Borrower**     Spouse     Common Law  
 Co-Investor     Co-Signer  
 Co-Habit     Fiance

**Employment History (3 years required)**

Current Employer \_\_\_\_\_

**Self Employed**     Sole Proprietor     Incorporated

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_

Position, Title \_\_\_\_\_ Years There \_\_\_\_\_

**Compensation Structure**     Salary     Hourly  
 Commission     Other

Annual Salary \_\_\_\_\_ Other Income \_\_\_\_\_

Current Employer \_\_\_\_\_

**Self Employed**     Sole Proprietor     Incorporated

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_

Position, Title \_\_\_\_\_ Years There \_\_\_\_\_

**Compensation Structure**     Salary     Hourly  
 Commission     Other

Annual Salary \_\_\_\_\_ Other Income \_\_\_\_\_

**Total Income: Principal and Co-Borrower**

\$

*If Current Employment is LESS than 3 years please obtain a Previous Employment History*

Previous Employer \_\_\_\_\_

Position, Title \_\_\_\_\_

City, Province \_\_\_\_\_ Years There \_\_\_\_\_

Annual Salary \_\_\_\_\_ Other Income \_\_\_\_\_

Previous Employer \_\_\_\_\_

Position, Title \_\_\_\_\_

City, Province \_\_\_\_\_ Years There \_\_\_\_\_

Annual Salary \_\_\_\_\_ Other Income \_\_\_\_\_

I hereby authorize Pro-Link Mortgage to perform a credit check in order to verify the above information for mortgage financing purposes. Sig 1: \_\_\_\_\_ Sig 2: \_\_\_\_\_



Audrey Kurek, Mortgage Associate  
 Phone: 403-247-9770  
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**Principal Borrower**

**ASSETS**

**LIABILITIES**

ASSETS		TDSR	LIABILITIES		
			Bank Name	Payment/Month	Total Debt
Cash/Savings Account		Personal Loan			
Chequing Account		Personal Loan			
Real Estate Deposits		Auto Lease			
Bonds (Market Value)		Alimony/month			
Stocks (Market Value)		Mtg. To Remain			
Real Estate (Market Value)		RRSP Loan			
Automobiles (Market Value)		Credit Card			
Year, make & model		Credit Card			
Personal Effects		Other			
RRSP's		Other			
Other		<b>Total</b>			
Other		"To Be MTG			
		Replaced RENT			
		at Time of OTHER			
		Purchase" OTHER			
<b>TOTAL ASSETS</b>		<b>TOTAL</b>			
<b>Current Net Worth</b>		<b>LIABILITIES</b>	Applied to TDSR		

**Co-Borrower**

**ASSETS**

**LIABILITIES**

ASSETS		TDSR	LIABILITIES		
			Bank Name	Payment/Month	Total Debt
Cash/Savings Account		Personal Loan			
Chequing Account		Personal Loan			
Real Estate Deposits		Auto Lease			
Bonds (Market Value)		Alimony/month			
Stocks (Market Value)		Mtg. To Remain			
Real Estate (Market Value)		RRSP Loan			
Automobiles (Market Value)		Credit Card			
Year, make & model		Credit Card			
Personal Effects		Other			
RRSP's		Other			
Other		<b>Total</b>			
Other		"To Be MTG			
		Replaced RENT			
		at Time of OTHER			
		Purchase" OTHER			
<b>TOTAL ASSETS</b>		<b>TOTAL</b>			
<b>Current Net Worth</b>		<b>LIABILITIES</b>	Applied to TDSR		

Bank Trust Name \_\_\_\_\_  
 Branch Location \_\_\_\_\_  
 Account Number \_\_\_\_\_

Solicitors Firm \_\_\_\_\_  
 Solicitors Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City, Prov, Postal Code \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Fax Number \_\_\_\_\_