



**Mortgage Loan Application Form**

**Applicant**

Surname: \_\_\_\_\_

Other Names: \_\_\_\_\_

Marital Status: Single ( ) Married ( )

Separated ( )

Present Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Previous Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact # (Home) \_\_\_\_\_

(Cell) \_\_\_\_\_

(Work) \_\_\_\_\_

Date Of Birth: \_\_\_\_\_

(Day/Mnth/Year)

Nis #: \_\_\_\_\_

No. Of Dependents: \_\_\_\_\_

Ages Of Dependents: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_  
(If Not Co-Applicant)

Next Of Kin: (Relationship) \_\_\_\_\_

Contact Info. \_\_\_\_\_

**Employment Information**

Name of Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

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

Length of Employment: \_\_\_\_\_

***If Self Employed***

Name of Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Partnership ( ) Limited Liability Co. ( )

Sole Proprietor ( )

Age of Business: \_\_\_\_\_

**Co-Applicant**

Surname: \_\_\_\_\_

Other Names: \_\_\_\_\_

Marital Status: Single ( ) Married ( )

Separated ( )

Present Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Previous Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact # (Home) \_\_\_\_\_

(Cell) \_\_\_\_\_

(Work) \_\_\_\_\_

Date Of Birth: \_\_\_\_\_

(Day/Mnth/Year)

Nis #: \_\_\_\_\_

No. Of Dependents: \_\_\_\_\_

Ages Of Dependents: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_  
(If Not Co-Applicant)

Next Of Kin: (Relationship) \_\_\_\_\_

Contact Info. \_\_\_\_\_

**Employment Information**

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Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

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

Length of Employment: \_\_\_\_\_

***If Self Employed***

Name of Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Partnership ( ) Limited Liability Co. ( )

Sole Proprietor ( )

Age of Business: \_\_\_\_\_

**DETAILS OF LOAN REQUIRED:**

*Purpose of the Loan:*

Purchase ( )	Construction ( )	Repair/ Remodel ( )	Refinance ( )
Purchase Price:		\$ _____	
Estimated Cost of		\$ _____	
Loan Balance:		\$ _____	
Less Applicant's Contribution:		\$ _____	
Loan Required:		\$ _____	

**STATEMENT OF MONTHLY INCOME & COMMITMENTS**

Main Employment Income:	\$ _____		
Other Income:	\$ _____	Source:	_____
Other Income:	\$ _____	Source:	_____
Gross Income:	\$ _____		

**MONTHLY EXPENSES:**

Mortgage:	\$ _____	Credit Union Loan:	\$ _____
Rent:	\$ _____	Credit Union Shares:	\$ _____
Travel (Bus/Gas):	\$ _____	Credit Union Savings:	\$ _____
Vehicle Maintenance:	\$ _____	Life Insurance Premium:	\$ _____
Cable TV:	\$ _____	Property Insurance:	\$ _____
Entertainment:	\$ _____	Vehicle Insurance:	\$ _____
Telephone/Internet:	\$ _____	Educational Commitment:	\$ _____
Electricity:	\$ _____	Pension Plan:	\$ _____
Water:	\$ _____	N.I.S. Contribution:	\$ _____
Child Allowance:	\$ _____	Hire Purchase:	\$ _____
Food:	\$ _____	Health Insurance:	\$ _____
Union Dues:	\$ _____	Miscellaneous:	\$ _____
Credit Card:	\$ _____	Other Loan (1):	\$ _____
		Other Loan (2):	\$ _____
		Other Loan (3):	\$ _____

Total Expenses: \$ \_\_\_\_\_  
 Surplus/Deficit: \$ \_\_\_\_\_

**ASSETS:**

Savings:	_____
Insurance Policy CSV:	_____
Accounts Receivable :	_____
Properties:	_____
Furniture & Equip.	_____
Automobile:	_____
Other Assets:	_____

TOTAL ASSETS: \_\_\_\_\_

**LIABILITIES:**

Loan Balance (1):	_____
Loan Balance (2):	_____
Loan Balance (3):	_____
Credit Union Loan Balance:	_____
Mortgage Loan Balance:	_____
Credit Card Limit:	_____
Hire Purchase facility Balance:	_____

TOTAL LIABILITIES : \_\_\_\_\_

Do You Own The House You Now Occupy? Yes ( ) No ( )

*I/We hereby declare that the statement and particulars on the foregoing pages are true and accurate at the date of this application. I/We authorize you to make any enquiries deemed necessary for confirmation of these particulars and for credit assessment purposes only.*

_____	_____	_____	_____
Signature of Applicant	Date	Signature of Co-Applicant	Date

**FOR OFFICIAL USE:**

Date Received:	_____	By Whom:	_____
Date Interviewed:	_____	Interviewer's Signature:	_____
Assessment Prepared By:	_____	Date:	_____