

COMMERCIAL MORTGAGE APPLICATION

Finn Larsen Mortgage Services #203-598 Main Street Penticton, BC V2A 5C7

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TYPE OF MORTGAGE / LOAN APPLICATION

TYPE: CONVENTIONAL OTHER MORTGAGE NUMBER: _____

AMOUNT: \$ _____ INTEREST RATE: _____% FIXED VARIABLE

TERM OF LOAN: _____ YEARS AMORTIZATION: _____ YEARS

PROPERTY INFORMATION

<input type="checkbox"/> PURCHASE	<input type="checkbox"/> CONSOLIDATION	<input type="checkbox"/> EQUITY	PROPERTY WILL BE: <input type="checkbox"/> OWNER OCCUPIED <input type="checkbox"/> INVESTMENT
<input type="checkbox"/> REFINANCE	<input type="checkbox"/> CASH OUT	<input type="checkbox"/> OTHER	

IF REFINANCE, PROVIDE THE FOLLOWING DETAILS:

YEAR ACQUIRED	PURCHASE PRICE	EXISTING MORTGAGES	PURPOSE	IMPROVEMENTS
		1ST: _____ 2ND: _____		<input type="checkbox"/> MADE <input type="checkbox"/> TO BE MADE COST: \$ _____

TITLE REGISTERED IN WHAT NAME(S):	MANNER IN WHICH TITLE WILL BE HELD:	ESTATE WILL BE HELD IN:
	<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> CORPORATION	<input type="checkbox"/> FEE SIMPLE <input type="checkbox"/> LEASE HOLD

SOURCE OF DOWNPAYMENT, SETTLEMENT CHARGED AND / OR SUBORDINATE FINANCING (explain):

LEGAL NAMES OF DIRECTORS, PARTNERS	SIN	BIRTHDATE	CIVIC ADDRESS	MAILING ADDRESS	% OF SHARES

NUMBER OF CLIENTS: _____ COMPANY CV ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
BUSINESS PLAN ATTACHED: <input type="checkbox"/> YES <input type="checkbox"/> NO

AUTHORIZATION

MEMBERS OF THE COMPANY WHO HAS AUTHORITY TO SIGN

PLEASE ATTACH THE LEGAL
SUPPORT DOCUMENTATION

AUTHORIZATION

THIS IS TO AUTHORIZE FINN LARSEN MORTGAGE SERVICES TO DISCUSS THE ONGOING APPLICATION
(PLEASE INITIAL THE BOXES)

LAWYERS INFORMATION	ACCOUNTANT INFORMATION
NAME: _____ ADDRESS: _____ _____ _____ PHONE: _____ EMAIL: _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	NAME: _____ ADDRESS: _____ _____ _____ PHONE: _____ EMAIL: _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
REALTOR INFORMATION	APPRAISOR INFORMATION
NAME: _____ ADDRESS: _____ _____ _____ PHONE: _____ EMAIL: _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	NAME: _____ ADDRESS: _____ _____ _____ PHONE: _____ EMAIL: _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
OTHER PARTY INFORMATION	OTHER PARTY INFORMATION
NAME: _____ ADDRESS: _____ _____ _____ PHONE: _____ EMAIL: _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	NAME: _____ ADDRESS: _____ _____ _____ PHONE: _____ EMAIL: _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

BUSINESS NUMBER:	
WCB NUMBER:	
EXISTING MORTGAGE NUMBER:	
EXISTING LOAN NUMBER:	

CREDIT BUREAU

THIS IS OUR AUTHORIZATION FOR A CREDIT BUREAU TO BE PERFORMED ON THE ABOVE APPLICATION BY FINN LARSEN MORTGAGE SERVICES.

AUTHORIZED
NAME: _____
(FULL LEGAL NAME PRINTED)

AUTHORIZED
NAME: _____
(FULL LEGAL NAME PRINTED)

ADDRESS: _____

ADDRESS: _____

(FULL ADDRESS)

(FULL ADDRESS)

SIN NUMBER: _____

SIN NUMBER: _____

ID NUMBER: _____
(BCID, DRIVER'S LICENCE, PASSPORT, BIRTH CERTIFICATE REGISTRATION)

ID Number: _____
(BCID, DRIVER'S LICENCE, PASSPORT, BIRTH CERTIFICATE REGISTRATION)

SIGNATURE: _____

SIGNATURE: _____

DATE: _____

DATE: _____

AUTHORIZED
NAME: _____
(FULL LEGAL NAME PRINTED)

AUTHORIZED
NAME: _____
(FULL LEGAL NAME PRINTED)

ADDRESS: _____

ADDRESS: _____

(FULL ADDRESS)

(FULL ADDRESS)

SIN NUMBER: _____

SIN NUMBER: _____

ID NUMBER: _____
(BCID, DRIVER'S LICENCE, PASSPORT, BIRTH CERTIFICATE REGISTRATION)

ID Number: _____
(BCID, DRIVER'S LICENCE, PASSPORT, BIRTH CERTIFICATE REGISTRATION)

SIGNATURE: _____

SIGNATURE: _____

DATE: _____

DATE: _____

APPLICANT INFORMATION

FIRST NAME:	LAST NAME:
FIRST PIECE OF ID NUMBER:	SECOND PIECE OF ID NUMBER:
SIN:	DATE OF BIRTH:
MARITAL STATUS:	NUMBER OF DEPENDANTS:
CELL PHONE:	HOME PHONE:
WORK PHONE:	EMAIL:
PREFERRED METHOD OF CONTACT:	RESIDENTIAL STATUS: <input type="checkbox"/> OWN <input type="checkbox"/> RENT _____ RENT AMOUNT <input type="checkbox"/> OTHER
CURRENT CIVIC ADDRESS:	CITY AND POSTAL CODE:
LENGTH OF TIME AT ADDRESS:	
PREVIOUS ADDRESS (If less than 3 years):	CITY AND POSTAL CODE:
LENGTH OF TIME AT PREVIOUS ADDRESS:	RESIDENTIAL STATUS AT PREVIOUS: <input type="checkbox"/> OWN <input type="checkbox"/> RENT _____ RENT AMOUNT <input type="checkbox"/> OTHER

CURRENT EMPLOYER:	EMPLOYER ADDRESS W/POSTAL CODE:
EMPLOYMENT TYPE: <input type="checkbox"/> FULLTIME <input type="checkbox"/> PART TIME <input type="checkbox"/> SEASONAL <input type="checkbox"/> CASUAL <input type="checkbox"/> SELF EMPLOYED	OCCUPATION:
GROSS ANNUAL INCOME:	LENGTH OF TIME AT OCCUPATION:
START DATE:	
PREVIOUS EMPLOYER (If less than 3 years):	PREVIOUS EMPLOYER ADDRESS W/POSTAL CODE:
EMPLOYMENT TYPE: <input type="checkbox"/> FULLTIME <input type="checkbox"/> PART TIME <input type="checkbox"/> SEASONAL <input type="checkbox"/> CASUAL <input type="checkbox"/> SELF EMPLOYED	OCCUPATION:
PREVIOUS GROSS INCOME:	LENGTH OF TIME AT PREVIOUS:
OTHER INCOME SOURCE: (CPP, OLD AGE, CHILD TAX, CHILD SUPPORT, WCB, SECOND JOB)	
GROSS OTHER INCOME:	
OTHER INCOME SOURCE: (CPP, OLD AGE, CHILD TAX, CHILD SUPPORT, WCB, SECOND JOB)	
GROSS OTHER INCOME:	
OTHER INCOME SOURCE: (CPP, OLD AGE, CHILD TAX, CHILD SUPPORT, WCB, SECOND JOB)	
GROSS OTHER INCOME:	

PART 2– CREDIT REFERENCES FOR PRIMARY APPLICANT

ASSETS

<u>DESCRIPTION</u>	<u>VALUE</u>

IF THERE IS ADDITIONAL ASSETS PLEASE ATTACH A SEPARATE SHEET.

BANK	LOCATION	ACCOUNT #	AMOUNT
TOTAL			

LENDER/BANK	DESCRIPTION	PAY OFF?	BALANCE	MONTHLY PYMT

PART 1A -CO-APPLICANT AND/OR GUARANTOR INFORMATION

Co-Applicant Guarantor

FIRST NAME:	LAST NAME:
FIRST PIECE OF ID NUMBER:	SECOND PIECE OF ID NUMBER:
SIN:	DATE OF BIRTH:
MARITAL STATUS:	NUMBER OF DEPENDANTS:
CELL PHONE:	HOME PHONE:
WORK PHONE:	EMAIL:
CURRENT RESIDENTIAL SAME AS APPLICANT: <input type="checkbox"/> YES <input type="checkbox"/> NO	
PREFERRED METHOD OF CONTACT:	RESIDENTIAL STATUS: <input type="checkbox"/> OWN <input type="checkbox"/> RENT _____RENT AMOUNT <input type="checkbox"/> OTHER
CURRENT CIVIC ADDRESS:	CITY AND POSTAL CODE:
LENGTH OF TIME AT ADDRESS:	
PREVIOUS ADDRESS (If less than 3 years):	CITY AND POSTAL CODE:
PREVIOUS RESIDENTIAL SAME AS APPLICANT: <input type="checkbox"/> YES <input type="checkbox"/> NO	
LENGTH OF TIME AT PREVIOUS ADDRESS:	RESIDENTIAL STATUS AT PREVIOUS: <input type="checkbox"/> OWN <input type="checkbox"/> RENT _____RENT AMOUNT <input type="checkbox"/> OTHER

CURRENT EMPLOYER:	EMPLOYER ADDRESS W/POSTAL CODE:
EMPLOYMENT TYPE: <input type="checkbox"/> FULLTIME <input type="checkbox"/> PART TIME <input type="checkbox"/> SEASONAL <input type="checkbox"/> CASUAL <input type="checkbox"/> SELF EMPLOYED	OCCUPATION:
GROSS ANNUAL INCOME:	LENGTH OF TIME AT OCCUPATION:
START DATE:	
PREVIOUS EMPLOYER (If less than 3 years):	PREVIOUS EMPLOYER ADDRESS W/POSTAL CODE:
EMPLOYMENT TYPE: <input type="checkbox"/> FULLTIME <input type="checkbox"/> PART TIME <input type="checkbox"/> SEASONAL <input type="checkbox"/> CASUAL <input type="checkbox"/> SELF EMPLOYED	OCCUPATION:
PREVIOUS GROSS INCOME:	LENGTH OF TIME AT PREVIOUS:
OTHER INCOME SOURCE: (CPP, OLD AGE, CHILD TAX, CHILD SUPPORT, WCB, SECOND JOB)	
GROSS OTHER INCOME:	
OTHER INCOME SOURCE: (CPP, OLD AGE, CHILD TAX, CHILD SUPPORT, WCB, SECOND JOB)	
GROSS OTHER INCOME:	
OTHER INCOME SOURCE: (CPP, OLD AGE, CHILD TAX, CHILD SUPPORT, WCB, SECOND JOB)	
GROSS OTHER INCOME:	

CREDIT REFERENCES FOR CO-APPLICANT AND/OR GUARENTOR

ASSETS

<u>DESCRIPTION</u>	<u>VALUE</u>

IF THERE IS ADDITIONAL ASSETS PLEASE ATTACH A SEPARATE SHEET.

BANK	LOCATION	ACCOUNT #	AMOUNT
TOTAL			

LENDER/BANK	DESCRIPTION	PAY OFF?	BALANCE	MONTHLY PYMT

EXISTING MORTGAGES / PROPERTIES

HELD BY:	
MORTGAGE #	
MUNICIPAL ADDRESS:	
LEGAL ADDRESS:	
RENTAL INCOME:	
MORTGAGE BALANCE:	
MORTGAGE TYPE:	___1ST ___2ND ___3RD
RATE %	
MATURITY DATE:	
PROPERTY VALUE:	
PAYMENT:	
PRINCIPAL RESIDENCE: Y N	REMAIN AFTER CLOSING: Y N
HELD BY:	
MORTGAGE #	
MUNICIPAL ADDRESS:	
LEGAL ADDRESS:	
RENTAL INCOME:	
MORTGAGE BALANCE:	
MORTGAGE TYPE:	___1ST ___2ND ___3RD
RATE %	
MATURITY DATE:	
PROPERTY VALUE:	
PAYMENT:	
PRINCIPAL RESIDENCE: Y N	REMAIN AFTER CLOSING: Y N
HELD BY:	
MORTGAGE #	
MUNICIPAL ADDRESS:	
LEGAL ADDRESS:	
RENTAL INCOME:	
MORTGAGE BALANCE:	
MORTGAGE TYPE:	___1ST ___2ND ___3RD
RATE %	
MATURITY DATE:	
PROPERTY VALUE:	
PAYMENT:	
PRINCIPAL RESIDENCE: Y N	REMAIN AFTER CLOSING: Y N

REFINANCE INFORMATION

PURCHASE DATE: _____

PURCHASE PRICE: _____

CLOSING/SWITCH DATE OF NEW MORTGAGE: _____

ORIGINAL MORTGAGE AMOUNT: _____

PURPOSE: _____

IMPROVEMENTS: _____

EXISTING MORTGAGE HOLDER: _____

OUTSTANDING BALANCE: _____

PENALTIES: _____

PROPERTY DESCRIPTION TO BE MORTGAGED

MUNICIPAL ADDRESS

LEGAL DESCRIPTION

PHYSICAL DESCRIPTION

BUILDING STYLE

SQUARE FEET (MAIN & TOTAL)

HEATING SYSTEM

OWNER OCCUPIED	YES	NO
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RENTAL	YES	NO	RENTAL INCOME
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SUITE	YES	NO	LEGAL	YES	NO
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MORTGAGE TYPE

PAYMENT

MATURITY DATE

PROPERTY VALUE

PRINCIPAL RESIDENCE	YES	NO
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EXISTING MORTGAGE

PENALTIES: _____