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BANK: SOURCE: **PERSONAL INFORMATION APPLICANT CO-APPLICANT** NAME NAME PHONE# PHONE# **EMAIL EMAIL** ADDRESS: ADDRESS: POSTAL CODE POSTAL CODE YEARS YEARS PREVIOUS ADDRESS (IF LESS THAN 3 YEARS) PREVIOUS ADDRESS (IF LESS THAN 3 YEARS) _YEARS__ YEARS BIRTH DATE(MM/DD/YYYY) _____/___/ BIRTH DATE(MM/DD/YYYY) _____/___/ S.I.N.# Í MARRIED Í COMMON-LAW Í SINGLE Í DIV/SEP. Í MARRIED Í COMMON-LAW Í SINGLE Í DIV/SEP. + OR - \$___ + OR - \$__ **EMPLOYMENT INFORMATION** EMPLOYER **EMPLOYER** ADDRESS ADDRESS PHONE# PHONE# POSITION POSITION DURATION (IF LESS THAN 3 YRS.)_____ DURATION (IF LESS THAN 3 YRS.) **EMPLOYER EMPLOYER** POSITION POSITION DURATION DURATION **INCOME INCOME** MONTHLY SALARY MONTHLY SALARY GROSS / NET GROSS / NET SELF-EMPLOYED **SELF-EMPLOYED** YEAR 1 YEAR 1 YEAR 2 YEAR 2 YEAR 3 YEAR 3 **FINANCIAL STATEMENT** MTHLY PYMT **ASSETS LIABILITIES** RESIDENCE \$ MORTGAGE TAXES ____AMORT___ CMHC AUTOS OWNED \$ MODEL YEAR PERSONAL LOAN \$ **INVESTMENTS \$** \$_____ LINE OF CREDIT CREDIT CARDS \$ \$ RENTAL PROPERTY \$ CREDIT CARDS \$ CASH/ACCOUNT \$ **LEASE** \$_____ \$ RENTAL MORT. By signing below, you are applying for a Mortgage as indicated above and:
a. Certify that the above information is true, and is furnished with the intent it be relied upon VALUE OF PROPERTY \$ by the lender in granting the mortgage.
b. Authorize Ontario Mortgage Action Centre Ltd./Lenders to obtain such factual and DOWNPAYMENT \$____OR___ investigative information regarding me from others as permitted by law, and authorize disclosure to other lenders and credit bureau information from our records. PURCHASE / RENEWAL / TRANSFER / REFI Date__ ____Applicant_ _Witness__ Date_____Applicant___