

REFINANCE APPLICATION

Toll-free tel: 1-866-809-5800
Toll-free fax: 1-866-371-0132



Do you currently have an RMG mortgage? No Yes If yes, mortgage # _____

- Purchase Refinance Equity Take-out Pre-approval
- Covenant Change - *You wish to add or remove someone from the title of an existing mortgage*
- Assumption - *You are applying to assume an existing RMG mortgage from someone else*
- Transfer of an existing mortgage: *Your existing mortgage holder* _____
Your mortgage reference # _____

Loan Amount Requested: \$ _____ Purchase Price/Value: _____ Closing Date: _____
Term Requested: _____ Amortization Requested: _____ Payment Frequency: _____
Source of Downpayment: _____
Referral Source: Staff Name of Employer: _____
 Staff Referral Name of Employee: _____
 Other _____

BORROWER INFORMATION	CO-BORROWER INFORMATION
First Name: _____	First Name: _____
Last Name: _____	Last Name: _____
S.I.N: _____	S.I.N: _____
Date of Birth: _____	Date of Birth: _____
<i>Preferred Contact</i> <i>Best Time To Call</i>	<i>Preferred Contact</i> <i>Best Time To Call</i>
Telephone: Home () _____ <input type="checkbox"/> Daytime <input type="checkbox"/> Work () _____ <input type="checkbox"/> Evening <input type="checkbox"/>	Telephone: Home () _____ <input type="checkbox"/> Daytime <input type="checkbox"/> Work () _____ <input type="checkbox"/> Evening <input type="checkbox"/>
Marital Status: Single <input type="checkbox"/> Separated <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widow <input type="checkbox"/> Common-Law <input type="checkbox"/>	Marital Status: Single <input type="checkbox"/> Separated <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widow <input type="checkbox"/> Common-Law <input type="checkbox"/>
Number of Dependents: _____	Number of Dependents: _____
Current Address: Rent <input type="checkbox"/> Own <input type="checkbox"/>	Current Address: Rent <input type="checkbox"/> Own <input type="checkbox"/>
Length of Time at Above Address: _____ <i>(if less than 3 years, please provide previous address)</i>	Length of Time at Above Address: _____ <i>(if less than 3 years, please provide previous address)</i>
Previous Address: _____	Previous Address: _____

Does either applicant have a history of bankruptcy: No Yes If yes, date of discharge _____

ASSETS			LIABILITIES				
	Location	Value		Location	Balance	Monthly	Pay off?(*)
Cash (bank account)			Bank Loans (personal loans, student loans, etc.)				
Other Cash (savings, gifts, deposit on house, etc.)			Credit Cards (include all store and bank cards)				
Other Assets (RRSPs, GICs, mutual funds, stocks, bonds, etc.)			Other Debt (spousal/child support, non-registered loans, liens)				
Automobiles (if owned)			Automobile(s) Loans (include all vehicles)				
Value of Present Home (if owned)			Current Mortgage or Rental Payment				
Other Real Estate (rental properties, cottages)			Other Mortgages				

Please mark debts to be paid off with mortgage proceeds with an asterisk ()*

NET WORTH Total Assets: \$ _____ - Total Liabilities: \$ _____ = \$ _____

BORROWER INFORMATION	CO-BORROWER INFORMATION
Current Employment Employer's Name: _____ Address: _____ Job Title: _____ Length of Service: _____ yrs Date Started: _____ Annual Income: \$ _____ Income Type: Salary <input type="checkbox"/> Hourly <input type="checkbox"/> Commission <input type="checkbox"/> Other <input type="checkbox"/> Employment Status: Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Contract <input type="checkbox"/> Self Employed: No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, \$ _____ Net Income If yes, type of business _____ Previous Employment <i>(please complete, if at current job for less than 3 years)</i> Employer's Name: _____ Address: _____ Job Title: _____ Length of Service: _____ yrs Date Started: _____ Annual Income: \$ _____ Income Type: Salary <input type="checkbox"/> Hourly <input type="checkbox"/> Commission <input type="checkbox"/> Other <input type="checkbox"/> Employment Status: Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Contract <input type="checkbox"/> Self Employed: No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, \$ _____ Net Income	Current Employment Employer's Name: _____ Address: _____ Job Title: _____ Length of Service: _____ yrs Date Started: _____ Annual Income: \$ _____ Income Type: Salary <input type="checkbox"/> Hourly <input type="checkbox"/> Commission <input type="checkbox"/> Other <input type="checkbox"/> Employment Status: Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Contract <input type="checkbox"/> Self Employed: No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, \$ _____ Net Income If yes, type of business _____ Previous Employment <i>(please complete, if at current job for less than 3 years)</i> Employer's Name: _____ Address: _____ Job Title: _____ Length of Service: _____ yrs Date Started: _____ Annual Income: \$ _____ Income Type: Salary <input type="checkbox"/> Hourly <input type="checkbox"/> Commission <input type="checkbox"/> Other <input type="checkbox"/> Employment Status: Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Contract <input type="checkbox"/> Self Employed: No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, \$ _____ Net Income

PROPERTY INFORMATION

Location: _____							
Type of Property:		One Storey <input type="checkbox"/>	Two Storey <input type="checkbox"/>	Three Storey <input type="checkbox"/>	Split Level <input type="checkbox"/>		
Year Built: _____		Property Square Footage: _____					
Annual Tax Estimate: \$ _____		I would like my taxes included with my mortgage: No <input type="checkbox"/> Yes <input type="checkbox"/>					
Property Description:	Detached <input type="checkbox"/>	Semi-Detached <input type="checkbox"/>	Townhouse <input type="checkbox"/>	Duplex <input type="checkbox"/>			
	Triplex <input type="checkbox"/>	Fourplex <input type="checkbox"/>	Apartment <input type="checkbox"/>	Striped <input type="checkbox"/>			
	Stacked <input type="checkbox"/>						
Parking Arrangements:	Attached <input type="checkbox"/>	Single <input type="checkbox"/>	Double <input type="checkbox"/>	Other <input type="checkbox"/>	_____		
	Detached <input type="checkbox"/>	Single <input type="checkbox"/>	Double <input type="checkbox"/>	Other <input type="checkbox"/>	_____		
	None <input type="checkbox"/>						
Tenure of Property:	Freehold <input type="checkbox"/>	Leasehold <input type="checkbox"/>	Condominium <input type="checkbox"/>	Unknown <input type="checkbox"/>	_____		
		Monthly Fee _____					
Zoning:	Major Urban Residential <input type="checkbox"/>	Urban Residential <input type="checkbox"/>	Building Construction:		Brick & Stone <input type="checkbox"/>	Insulbrick <input type="checkbox"/>	
	Rural Residential <input type="checkbox"/>	Recreational <input type="checkbox"/>			Stucco <input type="checkbox"/>	Aluminum <input type="checkbox"/>	
	* Please note, RMG does not provide mortgage financing on agricultural properties				Vinyl <input type="checkbox"/>	Other _____	
Heating Type:	Forced Air/Gas <input type="checkbox"/>	Oil <input type="checkbox"/>	Water Supply:		Municipal <input type="checkbox"/>	Private Well <input type="checkbox"/>	
	Hot Water <input type="checkbox"/>	Electric <input type="checkbox"/>			Shared Well <input type="checkbox"/>	Cistern <input type="checkbox"/>	
	Propane <input type="checkbox"/>	_____ <input type="checkbox"/>			Other <input type="checkbox"/>	_____ <input type="checkbox"/>	
	Other <input type="checkbox"/>	_____ <input type="checkbox"/>					
Waste Disposal:	Sewer <input type="checkbox"/>	Septic <input type="checkbox"/>	Holding Tank <input type="checkbox"/>	Other <input type="checkbox"/> _____			

AUTHORIZATION

Your mortgage application may be processed by another financial institution. Your mortgage may be sold to or funded by another financial institution. RMG Mortgages, a division of MCAP Financial Corporation or the financial institution which purchased or funded the mortgage may use your personal and financial information to promote products and services, including amendments and renewals of an existing mortgage to you. In the circumstances of a sale, the purchasing financial institution will advise you of its policies with respect to privacy and the use of customer information.

In order to assess your eligibility for our services, provide you with our service or assess your ability to meet your financial obligations, you authorize RMG and its agents or assigns.

(i) to exchange your personal information on an ongoing basis with credit bureaux and permit such organizations to verify your personal information in order to protect you, ensure the completeness of the information and maintain the integrity of the credit granting system; and

(ii) to co-operate with local, provincial and national authorities in the investigation of unlawful or improper activities in order to protect you and us from fraudulent transactions.

I/we hereby certify that the information provided in this application is complete and accurate to the best of my/our knowledge and belief. I/we hereby agree to complete, in writing, a mortgage or Deed of Loan or an Agreement to Assume (or Deed of Sale) the mortgage registered, or to be registered against the property described herein.

Borrower's Signature _____ Date _____

Co-Borrower's Signature _____ Date _____