

LOAN APPLICATION

THANCIAL					
Applicant Information			OLN	D ((D))	
Full Name:			_ S.I.N	Date of Birth:	
Number of Dependents:		Ages of Dependents: Divorced		0: 1	
Marital Status:	Married	ODIvorced O	Common Law	Single Postal Code:	Dravinas
Primary Address:				Postal Code:	Province
Number of years at curre	ent address		Work Dhone		
Home Phone: Cell Phone:			vvork Phone. Fax:	:	
Personal Email:					
Employer Information					
Current Employer:	•				
Years:		Gross Annual Incor	ne:	Occupation:	
Previous Employer (if le					
	•	Gross Annual Incor	ne:	Occupation:	
		ı looking to advance yo			
Address:					
City:		Province:		Postal code:	
Property Type:	ODetached	Semi-Detached	Townhouse		
Are you the only persor	n Registered on	Title? Yes O	No (If No, ple	ease complete the section below)	
Co-Applicant Person	al Information				
Full Name:			S.I.N	Date of Birth:	
Number of Dependents:		Ages of Dependents:			
Marital Status:	Married	ODivorced O	Common Law	Single	
Primary Address:				Postal Code:	Province:
Number of years at curre	ent address: _				
Home Phone:			Work Phone:	:	
Cell Phone:			Fax:		
Personal Email:			Work Email:		
Employer Information					
Current Employer:					
Years:		Gross Annual Incor	ne:	Occupation:	
Previous Employer (if le	ss than 3 years	at current position):			
Years:		Gross Annual Incor	ne:	Occupation:	
Other Income:		Source of other inco	ome:		
Required Financing:					
Amount of Loan Reques	t (Minimum \$25	,000.00):	F	Requested by date:	
Use of funds:					

Is this property: OSold OListed for sale OTo be list	sted for sale Other						
If Sold (Lawyer & Real Estate Agent information)							
Sale Price: Closing date:	Deposit Amount:						
Lawyer name:	Law firm name:						
Lawyer address:							
City: Province:	Postal code:						
Email:	Discourse						
Real Estate Agent	Real Estate Agent						
Real Estate Agent phone:							
If Listed for sale							
Listing Price:	Days on the market:						
Real Estate Agent	Real Estate Agent						
Real Estate Agent phone:							
If To Be Listed							
Future listing date:	Real Estate Agent						
Real Estate Agent	Real Estate Agent phone:						
Additional Comments							
Number of mortgages currently registered on title	_						
Mortgage balance for each mortgage and name of lender(s)							
Do you or co-applicant own any other properties? OYes	○No						
Documents Required							
·	s licence, passport, sin card, credit card)						
 ✓ 2 pieces of ID for the applicant and co-applicant(s) (drivers licence, passport, sin card, credit card) ✓ Void cheque 							
✓ Current mortgage(s) statement(s)							
✓ Current Property tax Bill							
Other Documents							
If sold							
✓ Purchase and Sale Agreement							
✓ Waivers							
✓ Copy of a deposit cheque If listed							
✓ Listing Agreement							
If to be listed							
✓ Future dated listing agreement							
Other							
✓ To be determined							

Applicant Initial	Co-Applicant Initial	I hereby represent and warrant that all the information provided in this application form is true and accurate. I hereby authorize Tembo Financial Inc. to collect and use my credit and personal information as provided in this form, and to contact the relevant parties to verify the information contained herein. I further authorize Tembo Financial Inc to collect and disclose personal and financial information about me to or from credit bureau, other financial institutions and other mortgage service providers.					
Applicant Initial	Co-Applicant Initial	In accordance with Canadian Anti-Spam Legislation I hereby consent to receiving commercial electronic messages from Tembo Financial Inc containing without limitation, publications, notices, agreements and correspondence. I acknowledge I can withdraw my consent at any time by providing a request to Tembo Financial Inc.					
Applicant Initial		In accordance with Proceeds of Crime (Money Laundering) and Terrorist Financing Act and associated Regulations I hereby authorize Tembo Financial Inc. to complete all necessary Identification, Banking and Credit checks and use my credit and personal information as provided in this form and to conduct the relevant parties to verify the information contained herein.					
Applica	nt Signature:		Print Name:	Date:			
Co-Applicant Signature:		ıre:	Print Name:	Date:			
			Print Save	Email			