LOAN/CREDIT Application



One focus, many solutions.



INVESTING

LENDING



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LOAN/CREDIT Application

	Please check if you are:	EDUCATION MEMBE	R 🗌 FAMILY	MEM	1BER	NEW CLIENT	[EXISTING CLIENT	
	School board affiliation(s):	OSSTF	ETFO		OECTA	AEFO	[OPC	
		СРСО			UNIVERSITY	PRIVATE SCHO	OL [OTHER	
VILS	Purpose of application				How did yo	ou hear about	t us?		
DETAILS							🗌 FAN	NILY	ENEWS
-	LINE OF CREDIT-SECURED		SECURED				🗌 wo	RKSHOP	
	OTHER (PLEASE SPECIFY):	OTHER (PLEASE SPECIFY):			PUBLICATION (PLEASE LIST):				
	AMOUNT APPLIED FOR:	AMOUNT APPLIED FOR:			OTHER (PLEA	SE SPECIFY):			

Applicant			Co-App	licant			
	MISS MS	PROF.	MR			☐ MS	PROF.
FIRST NAME	MIDDLE NAME		FIRST NAME		MIDDLE NAME		
LAST NAME			LAST NAME		/	/	
SOCIAL INSURANCE NUMBER	DATE OF BIRTH (MM/DD/YY)		SOCIAL INSU	IRANCE NUMBER	DATE OF BIRTH	H (MM/DD/YY)	
MARITAL STATUS	# OF DEPENDANTS		MARITAL STA	TUS	# OF DEPENDA	NTS	
CURRENT ADDRESS		APT/UNIT #	CURRENT AL	DDRESS			APT/UNIT #
СІТҮ	PROVINCE	POSTAL CODE	CITY		PROVINCE		POSTAL CODE
HOW LONG AT CURRENT ADDRESS		PER MONTH	HOW LONG AT CURRENT ADDRESS		PER MONTH		
HOME PHONE	CELL PHONE		HOME PHON	E	CELL PHONE		
EMAIL ADDRESS			EMAIL ADDR	ESS			
PREVIOUS ADDRESS (IF LESS THAN	3 YEARS AT CURRENT ADDRES	SS) APT/UNIT #	PREVIOUS A	DDRESS (IF LESS TH	HAN 3 YEARS AT CUP	RENT ADDRES	SS) APT/UNIT #
CITY	PROVINCE	POSTAL CODE	CITY		PROVINCE		POSTAL CODE
HOW LONG AT PREVIOUS ADDRESS			HOW LONG	AT PREVIOUS ADDRI	ESS		



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Applicant			Co-Applicant			
FULL-TIME	PART-TIME SEAS	ONAL 🗌 RETIRED] PART-TIME SEASO	DNAL 🗌 RETIRED	
CURRENT EMPLOYER/SCHC	OOL BOARD		CURRENT EMPLOYER/SCH	OOL BOARD		
ADDRESS			ADDRESS			
СІТҮ	PROVINCE	POSTAL CODE	CITY	PROVINCE	POSTAL CODE	
POSITION	HOW LO	NG AT CURRENT EMPLOYER	POSITION	HOW LON	IG AT CURRENT EMPLOYER	
BUSINESS PHONE	BUSINESS EMAIL		BUSINESS PHONE	BUSINESS EMAIL		
ANNUAL INCOME	——— 🗌 SALARY 🗌 H		ANNUAL INCOME	——— 🗌 SALARY 🔲 HO	DURLY CONTRACT	
PREVIOUS EMPLOYER (IF LE	SS THAN 3 YEARS WITH CURRI	ENT EMPLOYER)	PREVIOUS EMPLOYER (IF L	ESS THAN 3 YEARS WITH CURRE	NT EMPLOYER)	
ADDRESS			ADDRESS			
CITY	PROVINCE	POSTAL CODE	CITY	PROVINCE	POSTAL CODE	
POSITION	HOW LO	NG AT PREVIOUS EMPLOYER	POSITION	HOW LON	IG AT PREVIOUS EMPLOYER	
ANNUAL INCOME AT PREVIC	US EMPLOYER		ANNUAL INCOME AT PREVIOUS EMPLOYER			

		FIXED	
INSTITUTION NAME		INTEREST RATE	
	/ /	BI-WEEKLY	
MORTGAGE TERM (IN YEARS)	MATURITY DATE (MM/DD/YY)	MORTGAGE PAYMENT	—
		PROPERTY TAXES INCLUDED IN MORTAGE PAYMENT:	□ YES □ NO
ANNUAL PROPERTY TAX AMOUNT	VALUE OF PROPERTY		



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Assets				Liabilities		
	SAVINGS		\$	LINE OF CREDIT 1		\$
		INSTITUTION	TOTAL AMOUNT		INSTITUTION	AMOUNT OWING
RRSP			\$	LINE OF CREDIT 2		\$
-		INSTITUTION	TOTAL AMOUNT		INSTITUTION	AMOUNT OWING
			\$	AUTO LOAN 1		\$
	_ · · · · · ·	INSTITUTION	TOTAL AMOUNT		INSTITUTION	AMOUNT OWING
TFSA			\$	AUTO LOAN 2		\$
		INSTITUTION	VALUE		INSTITUTION	AMOUNT OWING
RESP			\$	CREDIT CARD 1		\$
		INSTITUTION	VALUE		INSTITUTION	AMOUNT OWING
			\$	CREDIT CARD 2		\$
VEHICLE 1 MAKE	MODEL	YEAR	VALUE		INSTITUTION	AMOUNT OWING
			\$	CREDIT CARD 3		\$
VEHICLE 2 MAKE	MODEL	YEAR	VALUE		INSTITUTION	AMOUNT OWING
			\$			\$
STOCK/BONDS		INSTITUTION	TOTAL AMOUNT	CREDIT CARD 4	INSTITUTION	AMOUNT OWING
			\$			\$
MUTUAL FUNDS		INSTITUTION	TOTAL AMOUNT	OTHER LOAN/DEBT	INSTITUTION	AMOUNT OWING
			\$			\$
GIC/TERM DEPOSIT		INSTITUTION	TOTAL AMOUNT	OTHER LOAN/DEBT	INSTITUTION	AMOUNT OWING
			\$			\$
(ADD UP VALUE/AMOUNTS OF ALL ASSETS)			(ADD UP TOTAL AMOUNT OWING	TOTAL LIABILITIES		

NOTES

FINANCIAL INFORMATION



PIPEDA CONSENT

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LOAN/CREDIT Application

Educators Financial Group Inc., in accordance with our privacy policy and obligations at law, collect, receive, use and disclose personal information about you, our client, for the purposes of verifying information provided; assessing your credit-worthiness; establishing credit and hold limits; maintaining client relationship; presenting your mortgage/loan/line of credit application to lenders/insurers to secure and/or renew a mortgage/loan/line of credit and/or relation services, and providing information to you about other products offered or approved by us, our affiliates, related entities or other third party financial partners.

By signing this form you agree to our collecting, using and disclosing your personal information at any time during the application, and on an on-going basis thereafter, for the foregoing purposes. We may disclose your personal information to, and receive your personal information from: consumer reporting agencies, credit bureaus, collection agencies, real estate appraisers, your present and past financial institutions, your past mortgage brokers, your present and past employers, creditors and tenants, your spouse or any third parties who may have information about your financial status, potential purchasers of our business and their advisors, any third party service providers to whom we may outsource our business functions, parties involved in the securitization, assignment or pledge of loan(s)/mortgage(s)/line(s) of credit, and any other parties with whom we propose to have a financial relationship. If there is more than one applicant, you also agree that we may collect, use and disclose personal information about each of you, from the other, for the purposes listed above. You also agree that if a mortgage default insurer is assigned to your application, such mortgage default insurer may obtain personal information about you from a credit reporting agency from time to time, and may use such information for any purpose related to the mortgage default insurance in connection with your application. You agree that the approval or granting of any mortgager by a lender to you, with or without mortgage default insurance, is not to be construed or relied on by you as representing the value or condition of any underlying security, or that it confirms that you have the ability to repay the mortgage debt.

If you do not wish to receive any information on any other products offered or approved by us; or information about any other products offered or approved by us, our affiliates, related entities, or other third party financial partners, please initial the box below.

NO, you may not send me any information on other products.

By signing this form, you also agree that Educators Financial Group Inc. and your independent Mortgage Agent may use and retain your personal information for the foregoing purposes for 7 years after the later of a) the date of your latest application to us, and b) the date that all of your loans/mortgages contracted through us have expired or were terminated. For more information, see our privacy policy at www.educatorsfinancialgroup.ca, or contact our compliance officer at 1.800.263.9541.

Furthermore, by signing this form, you acknowledge that Educators Financial Group Inc. and your independent Mortgage Agent may receive fees or program incentives from a lender (including money, points, goods, or services) which can vary by the amount, type, terms, and interest rate of the mortgage originated through Educators Financial Group Inc., and your independent Mortgage Agent.

I (we), the undersigned, have read and understand the above, and confirm that the information given in this application is true and correct:

Date

Applicant Signature

Applicant Name (Print)

Co-Applicant Signature

Co-Applicant Name (Print)

Date

Broker license 12185

#0113

2225 Sheppard Avenue East, Suite 1105 | Toronto, ON M2J 5C2 | Tel. 416.752.6843 or 1.800.263.9541 | Fax. 416.752.6649 or 1.888.662.2209

www.educatorsfinancialgroup.ca