



TARA CHICA
 BROKERAGE 10556 AGENT M20001726
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 www.ratedeal.ca tara@ratedeal.ca

Name:		Email:			Cell Number:		Date of Birth:		
S.I.N.	Spousal Support:	Child Support:	Married:	Divorced:	Separated:	Single:	Dependents:	CCB Income:	
HOME ADDRESS:							HOW MANY YEARS?		
PREVIOUS ADDRESS:							HOW MANY YEARS?		
PREVIOUS ADDRESS:							HOW MANY YEARS?		
EMPLOYER / FULL TIME				ADDRESS:					
OCCUPATION:			YEARS AT JOB:	ANNUAL INCOME:		SELF EMP	HOURLY	SALARY	
EMPLOYERE CURRENT:				ADDRESS:					
OCCUPATION			YEARS AT JOB:	ANNUAL INCOME:		SELF EMP.	HOURLY	SALARY	
EMPLOYER:				ADDRESS:					
OCCUPATION			YEARS AT JOB:	ANNUAL INCOME:		SELF EMP.	HOURLY	SALARY	
ASSETS		Current Value			LIABILITIES:		AMOUNT:		
Cash in Account					CREDIT CARDS:				
Cash in Account					CREDIT LINES:				
Vehicle #1					CAR LOANS:				
Vehicle #2					PERSONAL LOANS:				
Vehicle #3					CHILD SUPPORT:				
Vehicle #4					ALIMONY:				
					BANKRUPTCY:		PROPOSAL:	COLLECTIONS:	
					YES or NO		YES or NO	YES or NO	
ADDRESS OF OWNER-OCCUPIED PROPERTY:					1st Mortgage Registered:		2nd Mortgage Registered:		
Estimated Property Value:			Name of Bank or Mortgage Lender			Mortgage Balance:		Mortgage Balance:	
Date of Purchase:			Maturity Date(s) of Mortgage(s)			Term:	Amortization:	Interest Rate:	

CREDIT CONSENT AUTHORIZATION

If I have included information in this application in respect of any other person, including a co-applicant, I hereby confirm that such other person(s) has fully authorized me to release their personal information to you and to my Mortgage Centre Specialist and that such other person(s) consent to all of the terms set-out herein. The word "Information" means personal information about me and any other person(s) identified in this application, obtained from this application or other sources. I, the undersigned, hereby declare that all the information provided herein is to the best of my knowledge and belief to be true, complete and correct and I understand that it may be used to determine my credit worthiness. In order to assess my ability to meet my financial obligations I consent and authorize the submitting organization and its agents or assigns: to request and obtain personal information about me on an ongoing basis from credit bureaus from information you previously collected about me in order to assess my credit history; to release and exchange my personal information on an ongoing basis with credit bureaus in order to protect me, ensure the completeness of my information and maintain the integrity of the credit bureau agency; to co-operate with local, provincial and national authorities in the investigation of unlawful or improper activities in order to protect myself and Rock Capital Investments Inc. from fraudulent transactions; and iv) to disclose my personal information where necessary to protect my interests, and that of Rock Capital Investments Inc.

AUTHORIZATION TO REQUEST, EXCHANGE AND DISCLOSE PERSONAL INFORMATION TO AND FROM A CREDIT BUREAU

I certify that the information set out by me in this application is true and correct in order to collect and exchange personal information with the requisite agencies to obtain a credit bureau and for no other improper purpose.

X _____
SIGNATURE OF APPLICANT

DATE: _____

LIST OF OTHER PROPERTIES OWNED

<u>Address:</u>			
Name of Bank or Mortgage Lender:		Registered Mortgage:	
Estimated Property Value:		Mortgage Payment: Property Taxes:	
Date of Purchase:		Term:	Amortization: Interest Rate:
<u>Address:</u>			
Name of Bank or Mortgage Lender:		Mortgage Balance	
Estimated Property Value:		Mortgage Payment:	
Date of Purchase:	Purchase Price:	Term:	Amortization: Interest Rate:
<u>Address:</u>			
Name of Bank or Mortgage Lender:		Mortgage Balance	
Estimated Property Value:		Mortgage Payment: Property Taxes:	
Date of Purchase:		Term:	Amortization: Interest Rate:
<u>Address:</u>			
Name of Bank or Mortgage Lender:		Mortgage Balance	
Estimated Property Value:		Mortgage Payment:	
<i>Date of Purchase:</i>		<i>Term:</i>	<i>Amortization:</i> <i>Interest Rate:</i>

X _____
SIGNATURE OF APPLICANT

DATE: _____