



Green Lending Corp.

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Mortgage Application

Referral

Applicant Information					Co-Applicant Information				
First Name			Middle Initial		First Name			Middle Initial	
Last Name			Salutation		Last Name			Salutation	
Date of Birth	SIN		Marital Status		Date of Birth	SIN		Marital Status	
Home Phone		Work Phone			Home Phone		Work Phone		
Cellular		Home Fax			Cellular		Home Fax		
Preferred Email					Preferred Email				
Dependents		First Time Buyer? <input type="checkbox"/> Yes <input type="checkbox"/> No			Dependents		First Time Buyer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Present Address					Present Address				
Street Address (Including Unit/Suite/Apartment)					Street Address (Including Unit/Suite/Apartment)				
City		Province	Postal Code		City		Province	Postal Code	
Time at Residence		<input type="checkbox"/> Rent or <input type="checkbox"/> Own? \$			Time at Residence		<input type="checkbox"/> Rent or <input type="checkbox"/> Own? \$		
Previous Address (If Less than 3 Years at Present Address)					Previous Address (If Less than 3 Years at Present Address)				
Street Address					Street Address				
City		Province	Postal Code		City		Province	Postal Code	
Time at Residence		<input type="checkbox"/> Rent or <input type="checkbox"/> Own? \$			Time at Residence		<input type="checkbox"/> Rent or <input type="checkbox"/> Own? \$		
Employment/Income					Employment/Income				
Current Employer			<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal		Current Employer			<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal	
Current Employer Street Address					Current Employer Street Address				
City		Province	Postal Code		City		Province	Postal Code	
Occupation		Income Type	Gross Annual Income \$	Years	Occupation		Income Type	Gross Annual Income \$	Years
Years in Industry					Years in Industry				
Previous Employer (If Less than 3 Yrs at Current)			<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal		Previous Employer (If Less than 3 Yrs at Current)			<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal	
Previous Employer Street Address					Previous Employer Street Address				
City		Province	Postal Code		City		Province	Postal Code	
Occupation		Income Type	Gross Annual Income \$	Years	Occupation		Income Type	Gross Annual Income \$	Years
Other Income Source			Income \$	Years	Other Income Description			Income \$	Years
Assets									
Bank				Type		Balance \$			
Bank				Type		Balance \$			
Bank				Type		Balance \$			
RRSP						Value \$			
Stocks/Bonds/GIC						Value \$			
Automobile	Make		Model		Year	Value \$			
Automobile	Make		Model		Year	Value \$			
Household Goods						Value \$			
Other Assets						Value \$			
Other Assets						Value \$			
Other Assets						Value \$			

