



Loans2Go

Credit Application

APPLICANT	BUYER NAME (First, Middle, Last)		SIN #	DATE OF BIRTH	MARITAL STATUS	PHONE #	CELL #
	CO-BUYER NAME (First, Middle, Last) // Spouse or Common-law Only		SIN #	DATE OF BIRTH	MARITAL STATUS	PHONE #	CELL #
	PRESENT ADDRESS		CIVIC ADDRESS	CITY	PROVINCE	POSTAL CODE	HOW LONG
	PREVIOUS ADDRESS 1)			CITY	PROVINCE	POSTAL CODE	HOW LONG
	PREVIOUS ADDRESS 2)			CITY	PROVINCE	POSTAL CODE	HOW LONG
E-MAIL ADDRESS					DEPENDANTS	AGES	

HOME	<input type="checkbox"/> OWN	MORTGAGE COMPANY / LANDLORD		MORTGAGE / LINE OF CREDIT		BRANCH/CONTACT		PHONE #
	<input type="checkbox"/> RENT <input type="checkbox"/> FAMILY <input type="checkbox"/> R & B	PURCHASE PRICE	PRESENT VALUE	BALANCE OWING	PAYMENT	INCLUDING PIT <input type="checkbox"/> YES <input type="checkbox"/> NO	PROPERTY TAXES \$ _____ <input type="checkbox"/> M <input type="checkbox"/> A	SECURED: LIFE <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N DISABILITY <input type="checkbox"/> S <input type="checkbox"/> J <input type="checkbox"/> N

INCOME	BUYER'S EMPLOYER		POSITION	PHONE DIRECT #	EMPLOYER DIRECT #		
	EMPLOYER'S ADDRESS			CITY	PROVINCE	POSTAL CODE	
	INCOME \$	GROSS: <input type="checkbox"/> MONTHLY <input type="checkbox"/> ANNUALLY	HOW LONG	START DATE (< 6 MONTHS)	<input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME <input type="checkbox"/> SEASONAL		
	DESCRIBE YOUR INCOME:		SELF-EMPLOYED:		INCOME LINE 150 \$		TIPS? \$
	HOURLY RATE _____ HRS/WEEK? _____	2 YEARS NOTICE OF ASSESSMENTS <input type="checkbox"/> YES <input type="checkbox"/> NO		6 MONTHS BANK STATEMENTS (IF REQUIRED) <input type="checkbox"/> YES <input type="checkbox"/> NO		DECLARED? <input type="checkbox"/> YES <input type="checkbox"/> NO	
	OVERTIME RATE _____ HRS/WEEK? _____	PREVIOUS EMPLOYER		POSITION	EMPLOYER DIRECT #	HOW LONG	
PREVIOUS EMPLOYER ADDRESS		CITY	PROVINCE	POSTAL CODE	INCOME \$	GROSS: <input type="checkbox"/> MONTHLY <input type="checkbox"/> ANNUALLY	

INCOME	CO-BUYER'S EMPLOYER		POSITION	PHONE DIRECT #	EMPLOYER DIRECT #		
	CO-BUYER'S EMPLOYER'S ADDRESS			CITY	PROVINCE	POSTAL CODE	
	INCOME \$	GROSS: <input type="checkbox"/> MONTHLY <input type="checkbox"/> ANNUALLY	HOW LONG	START DATE (< 6 MONTHS)	<input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME <input type="checkbox"/> SEASONAL		
	DESCRIBE YOUR INCOME:		SELF-EMPLOYED:		INCOME LINE 150 \$		TIPS? \$
	HOURLY RATE _____ HRS/WEEK? _____	2 YEARS NOTICE OF ASSESSMENTS <input type="checkbox"/> YES <input type="checkbox"/> NO		6 MONTHS BANK STATEMENTS (IF REQUIRED) <input type="checkbox"/> YES <input type="checkbox"/> NO		DECLARED? <input type="checkbox"/> YES <input type="checkbox"/> NO	
	OVERTIME RATE _____ HRS/WEEK? _____	CO-BUYER'S PREVIOUS EMPLOYER		POSITION	EMPLOYER DIRECT #	HOW LONG	
CO-BUYER'S PREVIOUS EMPLOYER'S ADDRESS		CITY	PROVINCE	POSTAL CODE	INCOME \$	GROSS: <input type="checkbox"/> MONTHLY <input type="checkbox"/> ANNUALLY	

OTHER INCOME (DESCRIBE)				INCOME \$	PHONE #
PRIMARY BANK	CHEQUING <input type="checkbox"/> Y <input type="checkbox"/> N	BALANCE	SAVINGS <input type="checkbox"/> Y <input type="checkbox"/> N	BALANCE	CLIENT CARD NUMBER

Have you ever had an asset repossessed?
 Yes No

Have you declared bankruptcy?
 Yes No

Have you been sick or injured?
 Yes No

ASSETS	VALUE	PROPERTY & VEHICLES // Type, Make, Model	SEC?	VALUE	LIEN HOLDER
RRSP'S					
INVESTMENTS					
LIFE INSURANCE					

REQUESTED LOAN REPAYMENT FREQUENCY	<input type="checkbox"/> Monthly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Weekly	CO-SIGNER IF NEEDED <input type="checkbox"/> Y <input type="checkbox"/> N	ADDITIONAL CASH DOWN \$
---	---	--	----------------------------

REFERENCES	REFERENCE 1 // NAME	ADDRESS	PHONE #	RELATIONSHIP
	REFERENCE 2 // NAME	ADDRESS	PHONE #	RELATIONSHIP
	REFERENCE 3 // NAME	ADDRESS	PHONE #	RELATIONSHIP

INSURANCE COMPANY	POLICY #
DRIVER'S LICENCE #	CURRENT PREMIUM / PAYMENTS

Portions of the above information will be submitted for the purposes of obtaining credit. The undersigned authorizes Loans2Go to make such inquiries as are necessary to obtain credit information and authorize banks, financial institutions, and credit references to release information regarding their accounts.

I have provided the following: Paystubs Trustee Authorization Form Employment Verification Form Void Cheque Driver's Licence Trade Registration Insurance (Pink Card)

I / We certify that everything stated on this application is true and correct to the best of my / our knowledge.

Buyer Signature _____ Date _____

Co-Buyer Signature _____ Date _____