

## Chris Cornborough, Mortgage Specialist Phone: (604) 765-4823

		Pers	sonal In	formation					
Name: First, Middle, Last			Date of Birth SIN:		Ма	rital Status	Existing	Existing RBC Client?	
Spouse's Name: First, Middle, Last			Date of Birth SIN:		No De	of pendents	Existing	Existing RBC Client?	
Address			Own or Rent		Re	nt / Month	Length of Tir	Length of Time at Residence	
City / Province			Previous Address (if less than 2 years )						
Postal Code RBC Client (			Card #						
Home Phone Business Ph			one Spouse			Spouse's	's Business Phone		
Employer			Occupation				Years There		
Spouse's Employer			Occupation				Years There		
Previous Employer If Less Than 2 Years At Current Occupation									
Annual Income Spouse's Income			Other Income and Source						
Assets						Liabilitie	26		
Primary Financial Institution	Cash \$		Loans \$ Amount		Financ	Financial Institution		Payment \$	
Financial Institution(s)	Investments \$		Loans \$ Amount		Financ	Financial Institution		Payment \$	
Vehicles: Year / Model Value \$ Ln Pymt \$			Loans \$ Amount		Financ	Financial Institution		Payment \$	
Other Assets \$			Credit Card Limit \$ An			\$ Amo	nount Owing		
Other Assets \$			Credit Card Limit			\$ Amo	\$ Amount Owing		
Real Estate / Year Purchased Value		5	Mortgage \$ Fina		Financial	Institution	Payment \$	Income \$	
Real Estate / Year Purchased Value \$		5	Mort	Mortgage \$ Financial Ins		Institution	Payment \$	Income \$	
Real Estate / Year Purchased Value \$		3	Mortgage \$ Fina		Financial	nancial Institution P		Income \$	
Property Being Purchased Purchase			Property Taxes Mo			ortgage Amount Fixe		e Term (6 mo – 7)	
Names On Title of Property									
Confirmation of Information and Release of Authority to Verify									
I hereby certify that the information included in this application is correct. The information included in this application is for use by Royal Bank in determining the amount and conditions of credit to be extended. I understand that Royal Bank may also utilize other sources of credit information which it considers necessary in making its determination.									
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Signature of Applicant Signature of Co-Applicant							Date		