

Client Questionnaire for Refinance

By: Sean Syed AMP

Personal, Applicant 1		
Name (Last,First)		
Date of Birth		
Address		
SIN		
Home Phone #		
Single or Married		
Employment		
Employer's Name		
Phone #		
Status		
Since		
Position		
Salary		
Personal, Applicant 2		
Name (Last,First)		
Date of Birth		
Address		
SIN		
Home Phone #		
Single or Married		
Employment		
Employer's Name		
Phone #		
Status		
Since		
Position		
Salary		
Property		
Address		
Type		
Condo fee (if any)		
Lot #		
Legal description		
Lot size		
Living area		
Property taxes		
Age		
Garage		
Other		
Refinance info	First Mortgage	Second Mortgage
Purchase date and price		
LTV at purchase <small>(Loan to Value)</small>		
Property taxes		
Lender		
Outstanding mortgage		
Current value		
Rent (if any)		
Monthly payment		
Other property Owned	(if any)	
Address		
Lender		
Outstanding mortgage		
Current value		
Rent		
Monthly payment		
Property taxes		