



**1 Loan Type and Details**

New Loan       Re-write existing loan       Transfer-in      Account No. \_\_\_\_\_

Change existing loan options      Loan Amount \$ \_\_\_\_\_

**Loan Type**  
 3:1 Leverage     2:1 Leverage     1:1 Leverage     100% Loan     RSP     Other \_\_\_\_\_

**Margin Calls Options**      **Repayment Options**  
 No Margin Call    or     Margin Call       Interest Only    OR     Principal and Interest (amortization \_\_\_\_\_ Months)

**2 Client Information**

Borrower's Information (please check one box and print name in full)     Mr.     Mrs.     Ms.     Dr.     Corporate

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Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Initial \_\_\_\_\_ DOB (MM/DD/YYYY) \_\_\_\_\_

Co-Borrower Information (please check one box and print name in full)     Mr.     Mrs.     Ms.     Dr.     Corporate

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Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Initial \_\_\_\_\_ DOB (MM/DD/YYYY) \_\_\_\_\_

**3 Information Related to Employment (answer with "no" or "none" where applicable)**

**Primary Borrower Employment Status:**  
 Employed     Unemployed     Self-Employed     Commissioned Sales     Retired     Student     Other: \_\_\_\_\_

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Employer Name (if less than three years, provide previous employment details on separate sheet)      Years of Service \_\_\_\_\_

Position \_\_\_\_\_ Occupation \_\_\_\_\_ Annual Taxable Income \$ \_\_\_\_\_ Other Income \$ \_\_\_\_\_ Source \_\_\_\_\_

**Co-Borrower Employment Status:**  
 Employed     Unemployed     Self-Employed     Commissioned Sales     Retired     Student     Other: \_\_\_\_\_

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Employer Name (if less than three years, provide previous employment details on separate sheet)      Years of Service \_\_\_\_\_

Position \_\_\_\_\_ Occupation \_\_\_\_\_ Annual Taxable Income \$ \_\_\_\_\_ Other Income \$ \_\_\_\_\_ Source \_\_\_\_\_

**4 Financial Details**

Principal residence:     Own     Rent (Monthly Amount\$ \_\_\_\_\_)     Room and Board     With Parents

Assets	Amount	Liabilities	Creditor(s)	Total Amount	Monthly Payments
Residence (Est. Market Value)	\$ _____	Mortgage	_____	\$ _____	\$ _____
Other Real Estate	\$ _____	Other Mortgages	_____	\$ _____	\$ _____
Registered Savings	\$ _____	Condo Fees	_____	\$ _____	\$ _____
Cash/Liquid Assets	\$ _____	Line(s) of Credit	_____	\$ _____	\$ _____
Other Investments	\$ _____	Personal Loans	_____	\$ _____	\$ _____
Other	\$ _____	Credit Cards	_____	\$ _____	\$ _____
Other	\$ _____	Other Debts	_____	\$ _____	\$ _____
Total Assets \$ _____		Total Liabilities \$ _____		\$ _____	
Net Worth (Assets minus Liabilities) \$ _____					

INFORMATION – I/we represent and warrant that all personal information set out herein or provided to GP Wealth Management Corporation is true and complete. Personal information that GP Wealth Management Corporation holds about me/us will be used only in activities generally carried on by GP Wealth Management Corporation, and only the employees or agents of GP Wealth Management Corporation may get knowledge thereof provided that such information is necessary or useful to carry out their duties or to perform their mandate. Any file concerning me/us will be kept in the branch and/or the appropriate department of GP Wealth Management Corporation. At my/our written request, GP Wealth Management Corporation will allow me/us to consult the information which may be accessed by law at the branch or Head Office of GP Wealth Management Corporation.

**X** \_\_\_\_\_ **X** \_\_\_\_\_  
 Borrower's Signature      MM/DD/YYYY      Co-Borrower's Signature      MM/DD/YYYY