



305-1985 West Broadway Vancouver, BC V6J 4Y3
 T: 604.639.1400 | F: 604.648.8642 | info@hfla.ca

Guarantor Application					Application No.: _____ (for office use only)	
Name of loan applicant: _____						
Guarantor's Last Name		First Name		Country of Birth		Date of Birth (DD/MM/YY)
Previous Name(s) if Applicable _____						
Address				City		Postal Code
No. of Years at this address	No. of years in Vancouver?	Home Phone No.	Cell Phone No.	Fax No.	Email	
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widow/Widower <input type="checkbox"/> Common-Law						
Canadian Immigration Status: <input type="checkbox"/> Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Convention Refugee				Country of Previous Residence		No. of years
Dependents (Age & Gender) _____ M/F _____ M/F _____ M/F _____ M/F _____ M/F _____ M/F						
Guarantor's Occupation		S.I.N. No. (optional)		Employer		Phone No.
Address				Monthly Gross Salary		How long at this job?
Spouse's Occupation		S.I.N. No. (optional)		Employer		Phone No.
Address				Monthly Gross Salary		How long at this job?
Financial Statement						
Other Sources of Family Income, e.g. Social Assistance, Pension, Welfare, Spousal Support/Child Support etc. _____						
Specify type of income and monthly amount _____						
Home Purchase Price \$ _____ Year Purchased _____ Current Value \$ _____						
Mortgage owing \$ _____ Which institution? _____						
Monthly mortgage \$ _____ Taxes \$ _____ Monthly strata fees \$ _____ Monthly rent \$ _____						
Vehicle 1 _____ Model _____ Make _____ Year _____						
Owing \$ _____ Monthly payments \$ _____ With which institution? _____ Insurance \$ _____						
Vehicle 2 _____ Model _____ Make _____ Year _____						
Owing \$ _____ Monthly payments \$ _____ With which institution? _____ Insurance \$ _____						
Cash & Investment Assets (e.g., cash, investments, vacation property) _____						
Other Assets (e.g. vacation property) _____						
Assets in Other countries (include all details) _____						
Other loans or debts _____						
Other loans or debts:						
<input type="checkbox"/> Student Loan Amount owing: _____		<input type="checkbox"/> Line of Credit Amount owing: _____		<input type="checkbox"/> Credit Card 1 Amount owing: _____		
<input type="checkbox"/> Credit Card 2 Amount owing: _____		<input type="checkbox"/> Other (Please describe) _____				
Name of your Bank _____ Branch Location _____						

Are you Jewish? Yes No Please describe your Jewish Community Involvement _____

Relationship to Applicant: Relative _____ Friend Acquaintance Other. Please specify: _____

Signatures

I/we acknowledge and agree that the personal information collected from me and others above mentioned may be disclosed to the following people for the following purposes: (i) to my spouse, credit bureaus, credit reporting agencies, financial institutions, and other references I/we have provided to you to confirm my/our financial situation and my/our ability to provide a guarantee and/or guarantor; (ii) [to persons retained by HFLA (if any) to administer the loan I/we have been granted or have guaranteed for the purpose of such administration;] (iii) to persons involved in the financing, or facilitation of the financing, of the loan services for the purpose of HFLA providing or facilitating such financing; (iv) to other persons as necessary for the provision of the loan services; and (v) for the enforcement of the loan and/or guarantee that I/we have provided or given.

I/WE CERTIFY THAT THE INFORMATION IN THIS APPLICATION IS TRUE AND CORRECT

This _____ day of _____, 20____
(date) (month)

X _____ Print Name: _____