



BROKER LICENSE APPLICATION

VERICO Financial Group Inc.

P: 1.866.983.7426

F: 1.877.983.7426

The information contained in this application will help our Broker Licensing Committee assess your request to be granted a VERICO® License. The submission of this information places no continuing obligation on either party. The information contained in the application will be held in confidence.

Personal Data And Business History

Personal Information

Date: _____ Email: _____

Name: _____ Fax #: _____

Home telephone #: _____ Work#: _____

Home address: _____
(Street)

_____ (City) (Province) (Postal Code)

Date of Birth: _____ Driver's License Number: _____

Social Insurance Number: _____

Former residence:

Address: _____
(Street)

_____ (City) (Province) (Postal Code)

Previous Broker Experience

1) Company: _____

Address: _____

Position: _____ Employed from _____ to _____

Describe responsibilities: _____

2) Company: _____

Address: _____

Position: _____ Employed from _____ to _____

Describe responsibilities: _____

3) Company: _____

Address: _____

Position: _____ Employed from _____ to _____

Describe responsibilities: _____

Business Analysis

- 1) Do you plan to spend full-time in this business? Yes No
If no, please explain your other obligations _____

- 2) Are you presently a Realtor Lawyer Financial Planner Insurance Broker
- 3) Are you a member of CAAMP Yes No
- 4) Are you a member of MBABC, AMBA, or IMBA Yes No Other _____
- 5) Have you obtained your AMP designation Yes No
- 6) What was your loan volume for the most recent 12 months? _____
- 7) How many closed loans did you have in the most recent 12 months? _____
- 8) What was your gross commission for the most recent 12 months? _____
- 9) How many, if any, mortgage agents are presently employed by you? _____

Business Structure And Ownership

Business Ownership

- Sole Proprietorship Partnership Corporation

If corporation, corporation name _____

State partners' or shareholders' names and percentage of ownership: *(All partners and officers must also complete an application.)*

Name	Home Address	No. of shares	%

The following individual will be the *responsible broker*:

Name: _____ Broker License #: _____

Address: _____

Proposed location: _____

(Street address)

(City)

(Province)

(Postal Code)

Is the proposed location a:

- Store Front Location Office Space Home Office

Do you have an ownership interest in any other mortgage brokerage business?

- Yes No

Legal History

Please complete the following, have you ever:

Been Convicted of a felony **No** **Yes** If Yes please provide details:_____

Had your Mortgage broker license suspended or listed on probation **No** **Yes** If Yes please provide details:_____

Had legal action filed against you or your company within the last five years **No** **Yes** If Yes please provide details:_____

Had legal action initiated by you or your office within the last five years **No** **Yes** If Yes please provide details:_____

Filed for bankruptcy **No** **Yes** If Yes please provide details:_____

Breached a mortgage act regulation on any of the CAAMP Ethics of Best Practices Standards **No** **Yes** If Yes please provide details:_____

To the best of your knowledge past or present employed an agent that has been accused or committed a breach of mortgage, criminal or privacy laws **No** **Yes** If Yes please provide details:_____

Do you currently have Errors & Omissions Insurance **No** **Yes** If Yes please provide amounts and provider:_____

Do you currently have a privacy policy and procedure standards in compliance with all applicable privacy laws **Yes** **No** If no please provide details:_____

References

Fellow Mortgage Brokers / Originators / Lenders

- 1) _____ Contact: _____
Address: _____ Telephone: _____
- 2) _____ Contact: _____
Address: _____ Telephone: _____
- 3) _____ Contact: _____
Address: _____ Telephone: _____

Mortgage Lender References

Has any lender refused to do business with you or your firm or any agent employed by you either past or present for any reason?

Yes No

If Yes – Please Provide Explanation

As part of the VERICO membership due diligence program please authorize VERICO to check your references with the following lenders. All inquiries are strictly confidential.

Yes – I authorize VERICO to contact these lenders

TD Canada Trust	Street Capital	Firstline Mortgage
Scotia Bank	National Bank	HSBC
First National	Merix	MCAP
Resmor	Maple Trust	Home Trust
ING Direct	Maquarie	Other

As part of the VERICO membership due diligence program please authorize VERICO to contact the following sources to perform background checks

- Provincial Licensing &/or regulatory authority
 REDX
 Equifax

Summary Statement

1) Explain briefly your interest in affiliating with the VERICO® Network.

It is understood that by completing this application you confirm you are in the position to be able to form a relationship with Verico Financial Group Inc. For further clarification, you confirm you are currently not in a legal binding contract that would not allow you to approach Verico Financial Group Inc at this time. You agree that you have approached Verico Financial Group Inc on your own merit with the purpose of pursuing potential membership with Verico Financial Group Inc. and have not been solicited by Verico Financial Group Inc

The purpose of this application is for information only, and it is in no way binding upon either VERICO Financial Group Inc. or the applicant. It is, however, understood that the applicant supplies the information contained herein to the best of his/her knowledge and ability and that VERICO Financial Group Inc. relies on the contents herein in making a meaningful evaluation of applicant's qualifications.

In order to assess applicant's qualifications to join the VERICO network, VERICO Financial Group Inc. may conduct certain background investigations, including but not limited, to credit bureau reports and the applicant hereby authorizes VERICO Financial Group Inc. to conduct such investigations during the application process and, if membership is granted, from time to time thereafter as it may deem necessary.

Submitted this _____ day of _____, _____.

By _____

(Signature of Applicant)