

# Down Payment Gift Letter



Date: \_\_\_\_\_

The purpose of this letter is to confirm that the funds provided are a gift and not borrowed or required to be repaid.

Amount of Gift: \$ \_\_\_\_\_

Recipient of Gift: \_\_\_\_\_

Gift to assist in the purchase of: \_\_\_\_\_

Relationship to Recipient: \_\_\_\_\_

*Note: Must be an immediate family member.*

## CONFIRMATION OF GIFT

Mortgage Applicant Name(s): \_\_\_\_\_ , \_\_\_\_\_

We, the recipients of the gifted down payment and donors, certify that:

1. These funds are gifted and will not have to be repaid at any time.
2. No part of the gifted funds are being provided by a third party with a direct or indirect interest in the purchase/sale of the subject property.
3. The donor of the gift is an immediate relative. Immediate relative defined as parent, grandparent, sibling, child or legal guardian.
4. The funds have not originated from outside of Canada. Where funds have originated from outside of Canada, please provide details that include, source Country, and how funds were transferred. (*i.e., cheque, wire, etc.*)

## RECIPIENT OF GIFT

Borrower Name(s): \_\_\_\_\_ , \_\_\_\_\_

Signature(s): \_\_\_\_\_ , \_\_\_\_\_

Date: \_\_\_\_\_

## DONOR OF GIFT

Donor Name(s): \_\_\_\_\_ , \_\_\_\_\_

Donor Occupation(s): \_\_\_\_\_ , \_\_\_\_\_

Relationship to Borrower(s): \_\_\_\_\_

Donor Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Country: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone Number: (\_\_\_\_\_) \_\_\_\_\_

Signature: \_\_\_\_\_ , \_\_\_\_\_

Date: \_\_\_\_\_

Verification of Gift Source (needed only if Donor is in possession of funds)

Choose one of the options below to verify sufficient assets to cover the amount of the gift:

1. Bring this form to your Financial Institution and have them fill out the bottom of this form; or
2. Attach copies of bank or investment statements showing available funds for the amount being gifted.

Bank/Trust Company Name/Address (stamped) \_\_\_\_\_

Signature of Representative: \_\_\_\_\_