

NEW HOUSING APPLICATION

Cook's Ferry Indian Band Box 130 3691 Deer Lane Spences Bridge, BC VOK 2L0

Phone: (250) 458-2224 Fax: (250) 458-2312

Email: band.manager@cooksferry.ca

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COOK'S FERRY Housing Application

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Date	e of Application					
	e of Application					
	ber of bedrooms needed					
	erred location of rental	Merr	itt 🗖 Spenc	es Bridge		
1.	Applicant information		-			
	Please list the names of the list should be the pri Occupant' this could be member such as aunt, gr	mary occupant (head o spouse/partner, childre	f the househo en/dependen	old). Unde ts (son, da	r 'Relationship to I ughter), and other	Primary
	Nam	е	Date of	Male or		CFIB
	(First and La	st Name)	Birth	Female	to Primary Occupant	membership #
	1. Primary Occupant:					
	2. Secondary Occupant:					
	3.					
	4.					
	5.					
	6.					
2.	Current residential and Street No. & Name	postal address? /Box Number/R.R. #:				
	First Nation/City/Municipa	lity:	Provi	nce:	Postal Code:	
	Rental Application - FN Street No. & Name/Box Nu	Rental Unit: What is y mber/R.R. #:	our mailing a	address (if	different from #2	2):
	First Nation/City/Municipa	lity:	Provi	nce:	Postal Code:	11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1
3.	Contact information (N	TD: add row for email	of each occi	upant)		
٥.	Primary Occupant	Home phone #	Work phon	e# (Cell phone #	
	Secondary Occupant					

	ct in your absence for	messages —	Home phone #	Work phone #	Cell phone #
Relationship:	/e)		priorie "	P	
Employment his	story mployer/source of inco	ome:			
Employment Addre	-		<u> </u>		
City/Town/Reserve	e:	Postal Code	2:		
Telephone Number		Occupation	•		
Other Income:					
Note:*Applicant n	nust provide copy of r	nost recent T4 & c	urrent pay stu	b.*	
What is the month Please provide info	ly rent that you pay at ormation on your curred From Date	your current addre nt and last residenc To Date	:e:	Landlord	Own \$ Phone number landlord
Current address					
Previous address					
Current living c	onditions:	Ith and/or safety r	risk to the occu	pants (mus	t be
a. The current	dwelling poses a hear y documentation such ail:	as inspection rep	ort or someone	with autho	ority).
a. The current supported b	y documentation such	n as inspection rep	ort or someone	with autho	ority).

- b. An overcrowded situation by the National Occupancy Standards (NOS) is considered:
 - 1. National Occupancy Standards' guidelines;
 - a. Suitable housing:
 - i. Suitable housing has enough bedrooms for the size and make-up of resident households, according to National Occupancy Standard (NOS) requirements. Enough bedrooms based on NOS requirements means one bedroom for:
 - 1. each cohabiting adult couple;
 - 2. unattached household member 18 years of age and over
 - 3. same-sex pair of children under age 18; and
 - 4. additional boy or girl in the family, unless there are two opposite sex children under 5 years of age, in which case they are expected to share a bedroom.
 - ii. A household of one individual can occupy a bachelor unit (i.e. a unit with no bedroom).

documents by at documents document	documents by authoritative agent and using NOS's guidelines above.
d.	
	☐ Yes ☐ No
Nu ela	mber of household member(s) who require disabled access or special modifications. Please aborate and justify by proper documentation:
a.	□ 1 bedroom □ 2 bedrooms □ 3 Bedrooms □ 4 Bedrooms
d. Presently are you residing in a te and how long: Yes	oss Monthly Income:
Pri	mary Applicant \$/Month
Co	-Applicant \$/Month
Mu Aff	st provide proof of income - cheque stubs, bank statements, Income Assistance ordability Analysis to ensure applicant can afford monthly rent.
	Two landlord references are submitted (the references must be from the two most
documents by authoritative agent and using NOS's guidelines above. d. Presently are you residing in a temporary-type housing situation? If yes, provide details and how long: Yes	
documents by authoritative agent and using NOS's guidelines above. d. Presently are you residing in a temporary-type housing situation? If yes, provide details and how long: Yes	
П	Primary occupant (please print)
	Signed Date:
	Secondary occupant (please print)

		CONTROL OF THE STATE OF THE STA
	For Housing Unit use only	
Check off appropriate box and p	rint name where required	
1. Date Received:Via:	Acknowledge letter of receiving application and will be reviewed: Date:	3. Review of application for completion? Date Reviewed:
Person □ Mail □ E-mail □	Ву:	Reviewer:
		Complete:
		Incomplete:
4. Reason for incomplete:	5. For incomplete application, contacted applicant by:	6. Application eligible or ineligible?
	Person	Yes: ☐ No: ☐
	Phone	Details
	Notes:	
	Contacted person:	
7. Confirmation letter for eligibility or ineligibility sent:	8. Filed accordingly as eligible or ineligible:	9. Date of Conditional Housing Offer:
Date:	Yes: □ No: □	
	Date:	Ву:
Ву:	Inputted into the Housing Waiting	Accepted
	list:	Declined
	Yes: ☐ No: ☐ Date:	
Authorized by Print:	Authorized by Signature:	
Dated:		
Update # 1 Date: Via:	Any changes to application? Provide details:	Received by:
By: Person □ Mail □		
Phone □ E-mail □		
Update # 2 Date: Via:	Any changes to application? Provide details:	Received by:
By: Person □ Mail □		
Phone 🗌 E-mail 🗌		
Update # 3 Date: Via:	Any changes to application? Provide details:	Received by:
By: Person □ Mail □		
Phone □ E-mail □		

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