## Application for Rent-to-own Unit on Reserve

All information on this form will be held in strict confidence.

Date:		Received by: (staff use only)	
Applicants name:		Status number:	
Home phone	Work	Cell	
E-mail address:			
<b>Current Mailing Address</b>		Current Street Address	
How long at current address?	yrs	months	
RENT 🔘	OW	VN 🔘	OTHER
Family profile:			
2 adults with children		Single adult	
1 adult with children		Elder ( 55 or older)	
2 adults no children		Special needs or disabled	
Other # adults	# of childre	en	
NAMES	AGE	RELATIONSHIP	STATUS (YES OR NO)
	1		1

Financial information is collected as part of the screening process. **Rent to Own** applicants MUST be approved by a lending institution prior to processing of this application by the Band. We suggest you speak with your lender at your earliest convenience. Please advise them that the Band will provide a Ministerial Loan Guarantee if you are approved by your lender.

Financial Information: FOR HOUSEHOLD MEMBERS AGES 18 AND OVER

INCOME	Applicant	Co-Applicant 1	Co-Applicant 2
Employment Income			
Employment Insurance (EI)			
Student Allowance/ Band Sponsorship			
Pension			
Social Assistance (SA, welfare)			
Government funding- Family Bonus, Child Tax, Universal Child Care Benefit, GST etc.			
Other Income- home business (examples: Avon, fishing, contracting jobs, cash jobs)			
Total Monthly Income			

EXPENSES	Applicant	Co-Applicant 1	Co-Applicant 2
Current Rent/Mortgage			
BC Hydro			
Other utilities: (natural gas, propane,			
metered water, etc.)			
Groceries			
Insurance (vehicle and house if applicable)			
Other expenses (child care, taxes etc.)			
Total Monthly Expenses			

INCOME LESS EXPE	NSES			
Do you or your par	tner own a house anywl	here?	yes 🔵	no 🔘
If yes, address				
Current living arrang	ments:			
Rent	Own Lea	se 🔾	Other 🔵	
If Other, please Expl	ain:			
Current landlord				
Name:		ı	Phone:	
Have you previousl	y rented from the Band	yes 🤇	no C	
Employment Histor	y:			
Employment Histor	y: Name:			
			Phone:	
APPLICANT 1	Name:	nployer:	Phone:	
_	Name:	nployer:		/per week
APPLICANT 1	Name:  Name:  Address of current em	nployer:	Rate of pay: \$	/per week
APPLICANT 1	Name: Name: Address of current em Your position:	nployer:	Rate of pay: \$	•
APPLICANT 1  Current Employer  Previous	Name: Name: Address of current em Your position: Start date:		Rate of pay: \$ full time pa	•
APPLICANT 1  Current Employer  Previous	Name: Name: Address of current em Your position: Start date: Name:		Rate of pay: \$ full time	•

APPLICANT 2	Name:	
<b>Current Employer</b>	Name:	Phone:
	Address of current employer:	
	Your position:	Rate of pay: \$/per week
	Start date:	full time part time
Previous Employer	Name:	Phone:
	Address of current employer:	
	Your position:	Rate of pay: \$/per week
	Start date:	full time part time
APPLICANT 3	Name:	
<b>Current Employer</b>	Name:	Phone:
	Address of current employer:	
	Your position:	Rate of pay: \$/per week
	Start date:	full time part time
Previous Employer	Name:	Phone:
	Address of current employer:	
	Your position:	Rate of pay: \$/per week
	Start date:	full time part time

Are you, or a member of the household disabled? Yes No
Explain:
How many bedrooms O
I/WE UNDERSTAND THAT AN APPLICATION FOR A RENT-TO-OWN UNIT DOES NOT GUARANTEE THAT ONE WILL BE ALLOCATED TO ME/US
I/we declare that the information provided herein is true and correct and realize that any false information provided will result in the cancellation of the application for a RENT-TO-OWN home.
I/we also authorize First Nation to make enquiries necessary to process this application.
I/we also understand that RENT-TO OWN units will be assigned subject to SPECIFIC CRITERIA including proof of sustainable income First Nation does not provide "emergency shelter".
I/we understand that rental housing applications will be kept on file for one year. Applicants must renew their application package prior to Dec 15 <sup>th</sup> of each year to stay on the list.
I/we understand we must provide 2 letters of reference , 1 from a landlord and 1 from your employer prior to approval of this application.
Applicants signature Date:
Date:
Date:
First Nation Housing signature Date: