

Application - Social Housing or Rental Unit

For housing department use only		
Date Received: _____ By _____	Processed by: _____ Date: _____ Uploaded to website: _____	Application Complete? _____ Points Awarded: _____ Confirmation Letter sent with Application ID: _____

1. Applicant Information

Please list the names of all of the individuals who will be living in the home. The first name on the list is the primary occupant (head of the household). Under 'Relationship to primary occupant' this could be spouse/partner, children/dependents (son, daughter), and other family member such as aunt, grandparent or someone not related to the primary occupant.

Name (First and Last Name)	Date of Birth	Male or Female		OKIB Band #
1.				
2.				
3.				
4.				
5.				
6.				

2. What is your current address? _____

3. What is your mailing address (if different from #2):

Street No. & Name/Box Number/R.R. #:		
City/Municipality:	Province:	Postal Code:

4. Contact information

Applicant	Home phone #	Cell Phone #	Email Address
Co-Applicant			

5. Information on your current and previous accommodation.

Do you rent or own your current home (please check one)? Rent <input type="checkbox"/> Own <input type="checkbox"/>				
*If you own your own home, why are you applying? _____				
What is the monthly rent that you pay at your current address?				\$
<i>Please provide information on your current and last residence-The Housing Dept. will contact these landlords.</i>				
	From Date	To Date	Name of Landlord (if applicable)	Phone number for landlord
Current address				
Previous address				

6. Reason for applying for social housing or a rental unit.

Please state the reason you want to leave your present accommodation.

1. Are you Homeless?	Yes/No
2. Is your Residence unfit to live in?	Yes/No Reason why: _____ _____
3. Are you Living with Family?	Yes/No
4. Is rental to small?	Yes/No
5. Is there overcrowding?	Yes/No If yes by how many? _____

7. Employment History/Source of Income

Primary Occupant.

Name of present employer. If not currently employed, confirm source of income:	
Telephone Number:	Occupation:
Length of Employment: _____ years _____ months _____ weeks	

Secondary Occupant

Name of present employer. If not currently employed, confirm source of income:	
Telephone Number:	Occupation:
Length of Employment: _____ years _____ months _____ weeks	

8.

Do you owe money to the Okanagan Indian Band? If yes, which department: _____	Yes <input type="checkbox"/> No <input type="checkbox"/>
--	---

AFFORDABILITY ANALYSIS FOR HOUSING ASSISTANCE

1. Are you on S/A? Yes/No. If no, fill out below:

Step 1 Determine Monthly Household Income

List the regular NET monthly income (after deductions) for all permanent adult members of the household who will be living in the unit.

<u>Net Monthly Income</u>	Average monthly income amount
Net employment income (after taxes and deductions)	\$
Social Assistance benefits/ Employment insurance benefits	\$
Pension benefits	\$
Alimony, child support	\$
Other income (lease monies, room and board, investment income)	\$
Total net monthly income	\$

Step 2 Confirm Expenses

This section will be completed with a representative of the housing department who will give you the average housing costs you can expect to pay based on the average costs for the type of housing assistance you have applied for.

<u>Expenses</u>	Average Monthly Amount
Rent/mortgage/occupancy charge, maintenance fee, loan payment	\$
Household Bills (including hydro, gas, phone, cable, internet, etc.)	\$
Vehicle Payment/Insurance /Gas/Repairs/Transportation Costs	\$
Groceries/Clothing/Entertainment	\$
Child Care/Sporting Fees, etc.	\$
Personal Loan/Credit Card/Other Bills/Savings	
OTHER	
Total housing-related expenses	\$

Step 3 Amount available for housing-related expenses

Total net monthly income from Step 1		\$
Total monthly housing expenses from Step 2	<i>Minus</i>	\$
Amount available for monthly non-housing expenses	<i>Equals</i>	\$

FOR HOUSING DEPARTMENT USE ONLY.	
Total net monthly income from Step 1	(A)
Total expenses from Step 2	(B)
Total expenses as a percentage of total income (B ÷ A)	

Declaration/Financial Disclosure

All information provided shall be kept confidential and used for the purposes described herein.

- a) I/we understand that social housing is made available for Okanagan Indian Band members. If at any time during my/our tenancy, should I forfeit Okanagan Indian Band membership, I/we understand that I/we may be given a 6 month notice to vacate the unit.
- b) I/we understand that the social housing unit is exempt from provincial legislation regulating leasing and eviction procedures.
- c) The social housing program policy and documents have been provided to me and the procedures have been explained to me/us and I/we undertake to abide by them or as they might from time to time be amended by Operations, Lands & Housing.
- d) The undersigned consents to the obtaining of such information as the Okanagan Indian Band as a Landlord may deem necessary at any time in connection with the undersigned, in conjunction with the premises hereby applied for, or any renewal, or extension thereof.
- e) The undersigned consents to the disclosure of any information concerning the undersigned to any credit reporting agency or person with whom the undersigned has or proposes to have financial relations with.
- f) The undersigned warrants that all information presented above is correct. Submission of an incorrect application may result in the application from being excluded for consideration.
- g) Neither the primary or secondary occupant is in arrears on any Okanagan Indian Band payments, user charges or other debts.
- h) Misinterpretation of income, whether deliberate or as a result of an oversight may result in an approved applicant being required to repay the subsidy amount received, plus interest.

Primary occupant (please print)	
Signed	Date:

Secondary occupant (please print)	
Signed	Date: