## **Stswecem'c Xgat'tem Canoe Creek Indian Band**General Delivery Dog Creek, B.C., VOL 1J0 Phone (250) 440-5645 Fax (250) 440-5679



#### HOUSING POLICY

#### F105 SCHEDULE 4 **RENTAL HOUSING APPLICATION**

Date Received			
Applicant Information			
last name	first and middle name(s)		
unit no. mailir	ng address		
city	province	postal code	
home phone	work/cell phone	e-mail	
membership	status		
date of birth	marital status	do you presently own	a home?
Address of home owned by applic	cant.		
Present Landlord			
last name	first and middle name(s)		
unit no. addre	ess		
city	province	postal code	
home phone	work/cell phone	e-mail	
Rental History Have you rented Canoe Creek Indian Band yes no or any of the Northern Shuswap Tribal Council Bands housing in the past? If yes, explain:			

# Stswecem'c Xgat'tem *Canoe Creek Indian Band* General Delivery Dog Creek, B.C., VOL 1J0 Phone (250) 440-5645 Fax (250) 440-5679



Occupants Name(s) of all adult and minor occupants who will	be residing in the home.	
Name and Age	Relationship and Band Name or Number	
Housing Request		
Type(s) of home you are requesting		
<ul> <li>CMHC Unit 2-4 bedroom c/w basement.</li> <li>DIA Unit Older Unit 1-4 bedrooms. No S</li> </ul> Occupancy	Rent subsidized depending on Income. Subsidies for this unit.	
Date of residency needed		
Comments  Please provide a brief explanation to why you are and why you should receive a home within the cor Disabilities, Emergency situation.) What is your cu additional pages if you need more space.	nmunity. ( eg. overcrowding, loss of home,	
Applicant Employment Information		
Employer	type of business	
supervisor's last name	supervisor's first name	
unit no. address		
city provi	nce postal code	
home phone work/cell phone	e-mail	
duration of employment	monthly income	
full time / part time employment	other income	

# Stswecem'c Xgat'tem *Canoe Creek Indian Band* General Delivery Dog Creek, B.C., VOL 1J0 Phone (250) 440-5645 Fax (250) 440-5679



#### **Spouse's Employment Information**

Employer		type of business		
,		,		
supervisor's last name	supervisor's first name			
unit no. address				
city	province	postal code		
home phone	work/cell phone	e-mail		
duration of employment	monthly	income		
full time / part time employment	other income			
Other Information This is optional and is being gathered to assist the selection committee to easily assess the applicant.				
House Type Requested Please circle one				
<ol> <li>Handicap Dwelling – equipped with ramps and easy accessibility.</li> <li>Family Dwelling – 2-5 bedroom</li> <li>Bachelor Suit – 1-2 bedroom suite/duplex</li> <li>Single Family Unit – 1-2 bedroom house</li> <li>Elder's Unit (equipped for elders accessibility)</li> </ol>				
Are you willing and able to pay Please circle one				
A higher rent of a CMHC Unit     A lower rent or maintenance	A) A higher rent of a CMHC Unit \$500-600 or, B) A lower rent or maintenance fee for an older DIA home \$150-300.			
How much are you willing to pay for rent?				

### Stswecem'c Xgat'tem Canoe Creek Indian Band

General Delivery Dog Creek, B.C., V0L 1J0 Phone (250) 440-5645 Fax (250) 440-5679



I, also known as the A Department the right to obtain any information that p  • Current or past rental statements,  • Arrears Statements,  • Employment Information,  • Family Status	Applicant do hereby give the Housing pertains to the application for Housing. Eg:			
I, do hereby state that all the information on this application is true, and do agree that if any information is incorrect that my application will be deemed incomplete and will be taken off of the Housing request file until all information is updated.				
Attachments				
Please attach the following: Proof of Income (2 pay stubs or T4's, Income Tax Summary, Notice of Assessment) Proof of other Income declaration of income from SA department.				
References Please provide three (3) residency references.				
name	phone			
name	phone			
name	phone			
Applicant Signatures				
Applicant Signature	Date			
Housing Department Signature	Date			
Occupant's Signature	Date			
Occupant's Signature	Date			
Occupant's Signature	Date			
Occupant's Signature	Date			

Note: All Housing Applications must be updated yearly.

January of every year the Housing Request File will be updated. The Housing Department will call all applicants at the numbers on this application to give you the opportunity to re apply. It is the responsibility of the applicant to re submit an application if you wish to remain on the file.