

## **SENIORS HOUSING APPLICATION**

## Buildings are all non-smoking. Pets are not permitted.

You are applying for Connexus rental housing.

Please answer all questions and print clearly. If you need more room for any questions, please attach another sheet to the application.

I am applying for:								
<ul><li>☐ Pioneer Place Senior (55+) Independent Living (Fort St. James)</li><li>☐ Neghuni Ghunli-un Senior (55+) Independent Living (Fort St. James)</li></ul>								
☐ Parkview Place Senior (55+) Independent Living (Vanderhoof)								
☐ Riverside Assisted Living or ☐ Riverside Seniors Supported Housing (Vanderhoof)								
Applicant: Last name, Firs			Home Phone:					
Home Address - Suite Nun	Addres	S	Work phone:					
City Province P		Postal Code		Message phone:				
Household Composition: List yourself on line 1 and your spouse/partner on line 2 if applicable.								
Last name, First name	Birthdate mm/dd/yyyy	Sex	Relationship to tenant	Type of disability if any	Wheelchair requirements			
1.			Applicant		Yes □ No □			
2.					Yes □ No □			
Residency History: Please list your current address 1) and previous 2) (if at current address less than 3 years)								
Address	From (date)	7	Γο (date)	Name of Landlord	Landlord Phone #			
1)								
2)								
Have you ever lived in subsidized housing? Yes □ No □								
If yes, when did you live there? From To								
What is the name and address of the subsidized housing complex?								
Current Housing: Please describe your current housing by checking the appropriate box.								
☐ Apartment ☐ Trailer/Mobile Home ☐ Living with family/friends ☐ Hotel/Motel ☐ Housekeeping Room								
☐ Basement Suite ☐ Room & Board ☐ House/Duplex/Townhouse ☐ Other								
Please state your current	monthly rent \$_		Your avera	Your average monthly payment for heat \$				

Income Info members.	ormation: Li	st gross monthly incon	ne (befor	e deductions) from all so	ources, for all household		
Name		Source (employment, E	, pension(	s), Income Assistance etc.)	Gross Monthly Income		
1.							
2.							
		Total Gros	s Month	ly Income for Household			
Assets: Plea	ase list curre	nt value of all assets he	eld by you	and members of your h	ousehold.		
Cash, bank	balance						
Stocks/bonds/term deposits							
Real estate, RRSP, annuities, mortgage							
Reason for	Move:						
If YES, you n		• •	•	es	om your landlord.		
If No, why d	lo you wish t	o move? (Please be sp	ecific. At	tach sheet for additional	information)		
Reference:	Please list 3	people, including one	family me	ember only, as references	S		
Name				Phone Number			
I declare this infor include t househo	nt. that all the in mation and t he landlord o ld income(s) s	formation in this applica o do a landlord check an btaining satisfactory resu	tion is cor d a credit o ults from a establish n	rect. I give the landlord per check. I understand that ac credit check. I have provid eed and/or amount of subs	rstood if there is more than rmission to verify any, or all of cceptance of tenancy may ded my date of birth and gross sidy that I may qualify for. I		
Signature				Date			
Signature				Date			
Return to:	PO Box 12	Victoria St. 249 of, B.C. VOJ 3A0 57-9205		Connexus Office 349 Stuart Dr. PO Box 1146 Fort St. James, BC Ph: 250-996-7645 Fax: 250-996-7647			

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