



A. **APPLICANT:**

Name of Applicant						
Co-Applicant Name						
(if applicable)						
Telephone Numb	er	Home:			Cell:	<u>.</u>
Present Address		Suite	House number City Province		Province	Postal code
Applicant's Date Current Age:	of Birth:	•		Spouse's Da Current Age	ate of Birth (if applicable): e:	year
Marital status	Married	:()	Living with Spo	ouse: ()		
(please check)	Widowe	ed: ()	Separated: ()	Single: ()	
Social Insurance I	Number:			Driver's Lice	ense Number:	
Number of Years	Living					
in British Columb		Applicant: () years Spouse: () years				
Do you live 20 mil			•	ntre? Yes () No ()	
Do you have a dis	ability?	Yes () N	o ()			
B. Which Building are you applying to live in? If the building you are applying for is not available is another building acceptable to you? Yes () No ()						
Applying For:						
Bachelor () One Bedroom () Two Bedroom () Four Bedroom ()						
C. CURRENT ACCOMMODATION: Please describe your current accommodation as completely as possible by checking and / or completing the information below.						
What is your current accommodation? (please check)						
Apartment () Own Home () Housekeeping Room () Basement suite ()						
Room & Board () Trailer () Motel ()						
Other (please explain)					<u>.</u>	



Application for Accommodation

Please State (if applicable): What are you currently paying each month for rent? \$					
Does your rent include he					\$
What do you have in you	r present ac	commodation	? (please chec	k those applicable)	
Bathroom:	Private () Shared () None ()				
My bathroom contains:	Indoor plumbing () Sink () Tub () Shower () Toilet ()				
Kitchen:	Private () Shared () None ()				
Indoor Plumbing:	ndoor Plumbing: Stove () Hot Plate() Sink () Fridge () Own ()				
Laundry:	Private () Shared () None ()		
Outdoor play facilities:	Yes ()	No ()			
D. RESIDENT HISTOR required.)	Y: (Please lis	t your address((es) for the pa	st 2 years. Use a separa	ate sheet if
Address		From Date	To Date	Name of Landlord	Landlord Phone #
Above Address			Present		
Can we contact previous	andlords?			Check if yes	
Have you previously lived in BC Housing accommodations?			Check if yes		
If yes, what was the name	e and/or add	dress of the dev	velopment?		
What were the dates of your residency? From To					
Under whose name was t	he tenancy?	(i.e. Head of t	he Household)	





E. REASON FOR MOVE:

Are you under notice to end your present tenancy? Yes () No ()
If yes, please attach a copy of the legal Notice to End a Residential Tenancy from your landlord. If
you are not under notice, why do you wish to move? (Please be specific. Attach a sheet for additional
information if required):
Dawson Creek Society for Community Living
i i i for Community Living
F. HEALTH:
Medical Condition of: Applicant: () or Spouse: () List any medical conditions and/or disability and how you manage them.
Do you presently receive assistance with (please check if applicable):
Personal care (e.g. bath assist) () Medication Management ()
Mobility aids/help (e.g. receiving physiotherapy; using walker, cane, wheelchair) ()
Laundry/linen change () Meal provision () Grocery shopping ()
Handling finances/banking () Transportation (e.g. handidart) ()



Application for Accommodation

G. **INCOME INFORMATION:** (List Gross Monthly Income (before deductions) for all members of your household, from all sources).

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First name	Source (i.e. em	ployment, EI, pens	ion, GAIN, etc.)		Gross M	onthly Income(s)
1.						
2.						
3.						
4.						
5.						
Total Gross Montl	nly Income for Hou	ısehold				
H. ASSETS: (Please list current value of all assets held by you and members of your household.						
Cash/Bank	\$	Stocks/Bonds/	\$	Value of	f Real	\$
Balance		Term Deposits		Estate C	Owned	
Other (e.g. RRSP, Annuities, Mortgage held by household members) List below:						
(Please do not supply copies of financial information at this time. You will be required to submit this information if you are accepted.)						
I. COMPLETION OF APPLICATION CHECKLIST:						
Before bringing in your "Application for Accommodation" have you:						
 Completed your application in full? Enclosed a copy of "Notice to End Residential Tenancy, if applicable? 						

Application for Accommodation



DECLARATION: Please read and sign this statement.

I / We understand that this application does not constitute any agreement on the part of Dawson Creek Society for Community Living to provide me / us with rental accommodation. I / We declare that the information given in this application is correct, and complete. I / We understand that it is my / our responsibility to advice, Dawson Creek Society for Community Living of any changes to the information given in this application and to provide any supporting materials required for my / our application.

Pursuant to the Freedom of Information and Protection of Privacy Act, I / We give Dawson Creek Society for Community Living my / our consent to make any inquiries that are necessary to verify the information given in this application and I / we authorize any person, corporation or society agency to release to Dawson Creek Society for Community Living any information pertinent to the assessment of my / our application.

Signature of Applicant	Date Signed
Signature of Applicant	Date Signed
Signature of Witness	Date Signed

RE :	FERENCI Name	ES: please provide the information of two people not related to you.)
	Address	
	Phone	
2.	Name	
	Address	
	Phone	

January 2012