



TENANCY APPLICATION

Vernon Native Housing Society

#41 - 4305 - 19th Avenue

Vernon, BC V1T 9X4

Phone: 250-542-2834 Fax: 250-542-4544

reception@vernonnativehousing.ca

Date Received: _____

Contact Information

Applicant _____
(Last) (First) (Middle)

Co-Applicant _____
(Last) (First) (Middle)

Telephone _____
(Home) (Cellular) (Message)

Email Address _____ @ _____

Family Data

Name	Birthdate	Age	Sex	Relation	School Attended
Applicant					
Co-Applicant					

Native Ancestry? Yes Band: _____ Band/Métis #: _____
 No If no, list any members of your family of Native Ancestry:

Current Residence & Living Conditions

Address: _____
(Number & Street) (City) (Postal Code)

Type of Residence: Apartment Basement Other/Shared (Describe) _____
 (Check all that apply) House Duplex

Conditions: Repairs Needed Overcrowding Other restrictions(Describe) _____
 (Check all that apply) Rent Cost High Pets Allowed # of Bdrms _____

Please describe the condition of your current residence in general:

Monthly Expenses	Rent	Telephone
	Hydro	Other
	Heat	Other
		Total

Income Data for Applicants

(Include each adult over 19 years of age)

Source of Income #1:

Name: _____ SIN # _____

<input type="checkbox"/> Employment	<input type="checkbox"/> Social Services	<input type="checkbox"/> Other (Describe): _____
<input type="checkbox"/> E.I.	<input type="checkbox"/> Child Support/FMEP	_____

Employer: _____ Monthly Amount: _____

Phone: _____ How long employed: _____

Source of Income #2:

Name: _____ SIN # _____

<input type="checkbox"/> Employment	<input type="checkbox"/> Social Services	<input type="checkbox"/> Other (Describe): _____
<input type="checkbox"/> E.I.	<input type="checkbox"/> Child Support/FMEP	_____

Employer: _____ Monthly Amount: _____

Phone: _____ How long employed: _____

Source of Income #3:

Name: _____ SIN # _____

<input type="checkbox"/> Employment	<input type="checkbox"/> Social Services	<input type="checkbox"/> Other (Describe): _____
<input type="checkbox"/> E.I.	<input type="checkbox"/> Child Support/FMEP	_____

Employer: _____ Monthly Amount: _____

Phone: _____ How long employed: _____

Personal Data

Bank: _____ Driver's License: _____

Family Doctor: _____ Phone: _____

Emergency Contact: _____ Phone: _____

Do you own a vehicle? Yes No

Do you or any members of your family have any physical disabilities? If so, please describe: _____

Housing Requirements

How many bedrooms would you require? 1 2 3 4 Other: _____

How many bathrooms would you require? 1 2

Are stairs okay? Yes No

Do you have any pets? Yes No If yes, what type? _____

If yes, would you be willing to give up your pet? Yes No

Do you own a freezer/washer/dryer? Yes No

Do you have any large equipment or vehicles not in use? Yes No

If so, please describe: _____

References

Current Landlord: _____ Phone: _____
Address: _____
How long have you been a tenant? _____
Why are you leaving this address? _____

Please list any previous tenancies in the last 2 years:

Landlord: _____ Phone: _____
Address: _____
How long were you a tenant? _____
Why did you leave this address? _____

Landlord: _____ Phone: _____
Address: _____
How long were you a tenant? _____
Why did you leave this address? _____

Please list three personal references, excluding family, who have known you and/or your family for at least 2 years:

Name: _____	Relationship: _____	Phone: _____
Name: _____	Relationship: _____	Phone: _____
Name: _____	Relationship: _____	Phone: _____

Vernon Native Housing Society is a non-profit Society formed to provide affordable housing. The requested information will be used to select our tenants and to identify future housing needs. We request that you fill out the application to the best of your ability. If you have questions or require assistance, please contact the office and we would be pleased to assist you. **The application must be completed fully in order to be eligible for consideration.** The information collected will be kept in strict confidence.

The undersigned applicant(s) do hereby certify that all information on this application is true and correct. I/We give authorization to the Vernon Native Housing Society to verify any information provided in this application form and do hereby authorize any third party to provide whatever information may be required by the Vernon Native Housing Society to verify the accuracy of this information. **I/We authorize Vernon Native Housing Society the right to obtain or exchange any personal information with any personal information agent towards establishing or verifying my financial standing.**

I/We also acknowledge the following:

This is an application only. The receipt and acceptance of this application by Vernon Native Housing Society is not a promise of agreement, implied or otherwise, to provide me/us with rental housing.

This application will be kept on file for 1 year from the most recent application update. I acknowledge that it is my/our responsibility to keep this application up-to-date and that failure to update it on at least an annual basis may mean that it will not be considered when an appropriate unit becomes available.

Applicant signature(s):

Applicant

Date

Co-Applicant

Date