



Mole Hill Community Housing Society
Application for Housing

For office use only		
Date received	Interview	Unit size required

YOU ARE APPLYING TO a government assisted rental housing project. Note: Please answer all questions and print clearly. If you need extra room for any question, attach another sheet to the application.

A. Applicants: (Person(s) asking for housing)

Last name	First name	Mr. Miss Mrs. Ms.
Home Phone	Work Phone	Message Phone

Last name	First name	Mr. Miss Mrs. Ms.
Home Phone	Work Phone	Message Phone

Address: suite, house number, street, city, province, postal code (include mailing address if different)
Email address:

B. Household Composition: (List yourself on line 1, then list all other persons in your household who will be living with you. If there are more than 6 people in your household, attach the extra names on a separate sheet.)

Full Name (last name first)	Birth Date d/m/y	Sex	Relationship to Applicant	Type of Disability (if any)	Wheelchair Requirements
1			Applicant		<input type="checkbox"/> Yes <input type="checkbox"/> No
2					<input type="checkbox"/> Yes <input type="checkbox"/> No
3					<input type="checkbox"/> Yes <input type="checkbox"/> No
4					<input type="checkbox"/> Yes <input type="checkbox"/> No
5					<input type="checkbox"/> Yes <input type="checkbox"/> No

Do you expect the number of people in your family to change in the next 12 months? (pregnancy, family joining, family leaving)

Yes If yes, please explain: _____

Parking: Please list the vehicle(s) you need parking for:

Make and Model	Make and Model
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C. Employment Information

Employment Applicant #1

Current Employer/Company Name: _____

Address: _____

Position: _____ How long employed? _____

Supervisor's name: _____

Supervisor's ph: _____

Previous Employer/Company Name: _____

Address: _____

Position: _____ How long employed? _____

Supervisor's name: _____

Supervisor's ph: _____

Employment Applicant #2

Current Employer/Company Name: _____

Address: _____

Position: _____ How long employed? _____

Supervisor's name: _____

Supervisor's ph: _____

Previous Employer/Company Name: _____

Address: _____

Position: _____ How long employed? _____

Supervisor's name: _____

Supervisor's ph: _____

D. Tell us about yourself:

Please answer the following:	Yes(x)	No(x)	Office Use Only
***Are you under notice to terminate your present accommodation? (copy must be provided) If yes, please attach a copy of the legal Notice to End a Residential Tenancy from your landlord.			
Are you in temporary housing? (Transition house, shelter)			
Are you living with family or friends?			
Are you overcrowded or have a lack of privacy: Short one bedroom?			
Short two bedrooms?			
Short three bedrooms?			
Do you have accessible laundry facilities?			
Do you have inadequate or share bathroom facilities with people other than your family?			
Do you have inadequate or share kitchen facilities with people other than your family?			
Is there recreational space nearby?			
Is your present accommodation in disrepair or rundown?			
Is the present accommodation infested with vermin?			
Is your health affected (attach a Doctor's letter)			
Have you previously lived in subsidized accommodation? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what was the name and/or address of the development? _____			
What were the dates of your residency? From _____ To _____			

Do you smoke? Yes _____ No _____

E. References

<p>Applicant #1</p> <p>Name of current landlord: _____</p> <p>His/her address: _____</p> <p>His/her ph: _____ Length of stay: _____</p> <p>Could there be a problem if we called for a reference? (Circle one) Yes or No. If yes, explain reason for moving (use other side if you need more room to write):</p> <p>_____</p> <p>_____</p>
<p>Applicant #1</p> <p>Name of previous landlord: _____</p> <p>His/her address: _____</p> <p>His/her ph: _____ Length of stay: _____</p> <p>Could there be a problem if we called for a reference? (Circle one) Yes or No. If yes, explain reason for moving (use other side if you need more room to write):</p> <p>_____</p> <p>_____</p>

Applicant #2

Name of **current** landlord: _____

His/her address: _____

His/her ph: _____ Length of stay: _____

Could there be a problem if we called for a reference? (Circle one) Yes or No. If yes, explain reason for moving (use other side if you need more room to write):

Applicant #2

Name of **previous** landlord: _____

His/her address: _____

His/her ph: _____ Length of stay: _____

Could there be a problem if we called for a reference? (Circle one) Yes or No. If yes, explain reason for moving (use other side if you need more room to write):

F. Did you ever live in subsidized housing? _____ yes _____ no
If yes what was the name and address of the most recent subsidized housing development?

When did you live there? From _____ To _____

G. Income Information: (List gross monthly income [before deductions] for all members of your household, age 19 and older, from all sources.)

First Name	Source (i.e. employment, EI, pensions, income assistance, etc.)	Gross Monthly Income (\$)
1.		
2.		
3.		
4.		
5.		
Total Gross Monthly Income for Household \$		

H. Assets: (Please list the current value of all assets held by you and members of your household.)

Cash/ Bank Balance	\$	Stocks/Bonds/ Term Deposits	\$	Value of Real Estate Owned	\$

Other assets: (e.g. RRSPs, Annuities, Mortgages held by household members) Please list below.

	\$		\$
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I. Current Accommodation: (Please describe your current accommodation as completely as possible by checking and/or completing the information below.)

Please state:
 Your current monthly rent or mortgage payment \$ _____ Does your rent include heat? Yes No
 If NO, your average monthly payment for heat: \$ _____

Describe your current accommodation:
1. Apartment 2. House/Duplex/Townhouse 3. Housekeeping Room 4. Basement Suite
5. Room & Board 6. Trailer 7. Living with Family/Friends
8. Hotel/Motel 9. Other (please explain) _____

How many bedrooms do you have now? _____
 Do you:
1. Rent 2. Own 3. Share Expenses 4. Have Free Accommodation 5. Live in a Co-op

Do you have any household pets? Yes No (It is important that you list all pets.) Number of
 pets _____
 Do you have a dog? Yes If yes, indicate which type or breed of dog. _____

Other pets? (What kind?) _____
 Are you willing to give up your pet? (if any) Yes No

J. Application Checklist:

- Before returning your Application for Accommodation have you:
- Completed your Application in full?
 - Enclosed a copy of the 'Notice to End a Residential Tenancy', if applicable?
 - Signed and dated the Application in the space below?

DECLARATION: Please read and sign this statement.

I/We declare:

- This is my application; and
- All the information in it is correct and complete to the best of my knowledge and belief.

I/We authorize:

- Pursuant to the Freedom of Information and Protection of Privacy Act (the FOI Act), Mole Hill Registry to make any inquiries that are necessary to verify the information given in this application; and
- Pursuant to the FOI Act, any person, corporation or social agency to release to The Mole Hill Registry any information pertinent to the assessment of my/our application; and
- The Mole Hill Registry to receive and exchange with credit bureaus and my/our previous landlords credit and other information about me/us, to be used in the decision making process to provide me/us with rental accommodation.

I/We understand:

- That, in accordance with section 33 (c) of the FOI Act, the information on this application may be shared with other affordable housing providers in order to increase my/our opportunities for rent-geared-to-income housing; and
- That this application does not constitute any agreement on the part of The Mole Hill Registry to provide me/us with rental accommodation; and
- That it is my/our responsibility to advise The Housing Registry of any changes to the information given in this application and to provide any supporting materials required for my/our application.

I give the Mole Hill Community Housing Society my consent to verify the information given in this application. I authorize any person, corporation or social agency to release any information pertinent to the assessment of my application to the Mole Hill Community Housing Society.

Signature of Applicant	Date
Signature of Applicant	Date