## **TOQUAHT NATION**

Housing Act and Housing Regulation Form HA-1



## Date received:

## File no:

☐ Good financial standing with Toquaht Nation

(for housing and infrastructure manager use only)

## **ELIGIBILITY APPLICATION**

| I,  |             |            | _(Name of A <sub>I</sub> | pplicant) here | by appl     | ly under the Housi | ing Act for eligibility |  |
|---|-------------|------------|--------------------------|----------------|-------------|--------------------|-------------------------|--|
| to rent Toquaht so  | ocial hous  | ing.       | _, , , ,                 | •              | • 11        | •                  |                         |  |
| APPLICANT'S PERSONAL INFORMATION  |             |            |                          |                |             |                    |                         |  |
| Ful   | ll Name:    |            |                          |                |             |                    |                         |  |
| Toquaht   | Citizen:    | □Yes       | □No                      |                |             |                    |                         |  |
| Date of Birth:  |             |            |                          |                | C           | urrent Age:        |                         |  |
| Marital Status:   |             | □Single    |                          | □Married □Comr |             | □Common            | ı-law                   |  |
| Phone #s:   |             |            |                          |                |             |                    |                         |  |
| Mailing A   | Address:    |            |                          |                |             |                    |                         |  |
| Email A   | Address:    |            |                          |                |             |                    |                         |  |
| SPOUSE'S PER  | SONAL       | INFORMATI( | ON (if applic            | able)          |             |                    |                         |  |
| Spouse's Full Name:   |             |            |                          |                |             |                    |                         |  |
| Toquaht Citizen:  |             | □Yes       |                          | □No            |             |                    |                         |  |
| <b>DEPENDENT CHILDRENS' PERSONAL INFORMATION</b> (if applicable, attach list as a schedule if more than 4 children) |             |            |                          |                |             |                    |                         |  |
|   | Child 1     |            | Child 2                  |                | Child 3     | 3                  | Child 4                 |  |
| Child's Full<br>Name:   |             |            |                          |                |             |                    |                         |  |
| Date of Birth:  |             |            |                          |                |             |                    |                         |  |
| Toquaht<br>Citizen:   | □Yes<br>□No |            | □Yes<br>□No              |                | □Yes<br>□No |                    | □Yes<br>□No             |  |

| INFORMATION ABOUT  | Γ YOUR CURRENT RESIDENCE                             |      |  |  |  |  |
|--|--|------|--|--|--|--|
| How many adults (18 years  | s and over) are living in your current residence?    |      |  |  |  |  |
| How many children (under 18 years) are living in your current residence?   |  |      |  |  |  |  |
| How many bedrooms are in your current residence?   |  |      |  |  |  |  |
| Please describe the nature in which you occupy your current residence, for example live rent-free with parents, couch-surfing, single room occupancy (rent a single room in a multi-unit building with shared kitchen and bathroom), boarding (rent a single room in a house with shared kitchen and bathroom), rent an apartment or house alone or with a spouse, children or roommates |  |      |  |  |  |  |
|  |  |      |  |  |  |  |
| TYPE OF UNIT APPLIC  | CANT IS SEEKING (select one or more of the following | · () |  |  |  |  |
| ☐ Bachelor suite or one-be   |  | ,    |  |  |  |  |
| ☐ Two-bedroom  |  |      |  |  |  |  |
| ☐ Three-bedroom  |  |      |  |  |  |  |
| ☐ More than three bedroor  | ns   |      |  |  |  |  |
|  |  |      |  |  |  |  |
| Have you been convicted of an indictable offence within the past 10 years? ☐ Yes ☐ No  |  |      |  |  |  |  |
| HOUSEHOLD INCOME   | DECLARATION  |      |  |  |  |  |
| A. APPLICANT   |  |      |  |  |  |  |
| Employer:  |  |      |  |  |  |  |
| Position:  |  |      |  |  |  |  |
| Full-time, part-time or other:   |  |      |  |  |  |  |
| Before tax annual income:  |  |      |  |  |  |  |
| B. SPOUSE (if applicable)  |  |      |  |  |  |  |
| Employer:  |  |      |  |  |  |  |
| Position:  |  |      |  |  |  |  |
| Full-time, part-time or other:   |  |      |  |  |  |  |
| Before tax annual income:  |  |      |  |  |  |  |

C. OTHER RESIDENTS (complete for each other person earning income in your household, attach list as a schedule if more than 4 residents)

|  | <u> </u>   |                             |                |   |            |  |  |  |
|--|------------|-----------------------------|----------------|---|------------|--|--|--|
|  | Resident 1 | Resident 2                  | Reside         | nt 3                                    | Resident 4 |  |  |  |
| Name of resident:  |            |                             |                |   |            |  |  |  |
| Employer:  |            |                             |                |   |            |  |  |  |
| Position:  |            |                             |                |   |            |  |  |  |
| Full-time, part-time or other:   |            |                             |                |   |            |  |  |  |
| Before tax<br>annual<br>income:  |            |                             |                |   |            |  |  |  |
|  |            |                             |                |   |            |  |  |  |
| I have attached the following documents in support of my application: (check all that apply)   |            |                             |                |   |            |  |  |  |
| ☐ My tax return  |            | ☐ Spouse's tax ret          | urn            | ☐ Other resident's tax return           |            |  |  |  |
| ☐ My pay stub  |            | ☐ Spouse's pay str          | ub             | ☐ Other resident's pay stub             |            |  |  |  |
| ☐ Letter from my employer ☐ Other:   |            | ☐ Letter from spot ☐ Other: | use's employer | ☐ Letter from other resident's employer |            |  |  |  |
|  |            |                             |                | ☐ Other:                                |            |  |  |  |
| DECLARATION  I hereby solemnly declare that the information I have provided is complete and the contents are true to the best of my knowledge. |            |                             |                |   |            |  |  |  |
| Signature:   |            | Da                          | te:            |   |            |  |  |  |

The Housing Committee may request additional information it considers necessary or desirable from the applicant or any other person before determining the applicant's eligibility to rent Toquaht social housing. Any additional information provided between the date of the original application and the date a decision is made regarding the applicant's eligibility is deemed to from part of the original application.