

APPLICATION FOR ACCOMMODATION • URBAN HOUSING Program (CONFIDENTIAL)

This personal information is collected under the authority of the Alberta Housing Act and will be used for administering the housing program. It is protected by the privacy provisions of the *Freedom of Information and Protection of Privacy Act*.

I understand that this is just an application and is not an agreement on the part of THE TOWN OF DRAYTON VALLEY AND URBAN HOUSING PROGRAM and, or its agents, to provide me with rental accommodation.

I further acknowledge the right of THE TOWN OF DRAYTON VALLEY AND URBAN HOUSING PROGRAM, or its agents, at any time prior to the execution and delivery to me of a lease, to withdraw or cancel, without penalty or liability for damages or otherwise, any prior approval of this application.

I authorize THE TOWN OF DRAYTON VALLEY AND URBAN HOUSING PROGRAM or its agents to investigate any or all of the statements made by me in this application, being fully aware that discovery of any false statement shall cancel any further consideration of my application.

I further agree that I am obligated to advise THE TOWN OF DRAYTON VALLEY AND URBAN HOUSING PROGRAM, or its agents, in writing, of any changes in family composition, gross family income, assets, employment or change of address, should they occur.

PLEASE INCLUDE IN YOUR APPLICATION:

- 1. **MOST RECENT NOTICE OF ASSESSMENT**
- 2. **PROOF OF INCOME FOR THE LAST 3 MONTHS (this can include: Child Tax Credit, Child Support, Income Support, AISH, Paystub, banking information, etc.)**
- 3. **REFERENCES MUST BE INCLUDE PREVIOUS LANDLORD OR EMPLOYER**
- 4. **CALL AND BOOK AN APPOINTMENT BETWEEN MONDAY-WEDNESDAY 8:00AM-4:00PM TO GO OVER YOUR APPLICATION.**

****REMINDER THAT THE URBAN HOUSING PROGRAM DOES NOT ACCEPT PETS, CANNABIS AND SMOKING IN THEIR UNITS. ****

****ONLY PERSONS ON THE LEASE ARE ABLE TO STAY IN THE URBAN HOUSING PROGRAM UNITS! IF YOU WOULD LIKE TO ADD SOMEONE TO THE LEASE, PLEASE HAVE THEM FILL OUT THEIR OWN APPLICATION OR INCLUDE THEM IN THIS APPLICATION****

Signature of Witness

Signature of Applicant

Signature of Applicant

FOR OFFICE USE ONLY
Received by: _____ Date Received: _____

APPLICATION FOR ACCOMMODATION • URBAN HOUSING Program (CONFIDENTIAL)

1.0 PERSONAL INFORMATION

1.1 Applicant's Name: _____
(FIRST) (LAST)
 Home Phone: _____ Cell Phone: _____ Bus. Phone: _____
 Current Address: _____
 Mailing Address (if different from above): _____
 Email Address: _____

PLEASE KEEP CONTACT INFORMATION CURRENT

Residency

1.2 Co-Applicant's Name: _____
(Last) (First)

1.3 How long have you been in this relationship? _____ years.

1.4 List all persons, **INCLUDING YOURSELF**, who will be living with you should your application be approved:

LAST NAME	FIRST NAME	RELATIONSHIP TO APPLICANT	BIRTH DATE DAY/MO./YR.	OCCUPATION/ SCHOOL GRADE
		APPLICANT		

1.5 Are all members listed above Canadian Citizens? No _____ Yes _____

If **NO**, provide copies of immigration papers for members who are not Canadian Citizens.

1.6 **PETS ARE NOT ALLOWED** – in any of the rental properties. Applicants who have pets need to find alternative housing arrangements for their pets WHEN they gain housing through this program. This includes rodents, fish and reptiles etc.

Family Status

2.0 CURRENT HOUSING SITUATION

2.1 Current Landlord's: _____ Phone Number _____

Have you ever been evicted? No _____ Yes _____ Reason for Eviction _____

2.2 Present rent or house payment is \$ _____ per month, plus \$ _____ utility costs (Electrical / Heat / Water)

Total Cost per month for Accommodation \$ _____

2.3 Are there any health and/or safety concerns with your current housing situation? No _____ Yes _____

If Yes, please explain _____

3.0 REFERENCES

Please provide two references that we can contact (**Landlord and/or Employer References**)

Name	Relationship	Contact Information / Number

4.0 INCOME & ASSETS

4.1 ASSETS: Applicants are allowed to hold assets providing they complement the objectives of the program.

Approximate Value of Assets: _____ \$ _____

NOTE: Essential personal/household effects (clothes, furniture, etc.) are not included as assets.

4.2 STATEMENT OF INCOME (CONFIDENTIAL)

Income Verified

Gross Income Range for All Members of Household (Confidential):

0-15,000 per annum	15,001 – 25,000 per annum	25,001 – 35,000 per annum	35,001 – 50,000 + per annum
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CNIT

Applicants Current Income

If you have been with your current employer/source of income less than 3 years please indicate Income/Employment record for the past three years:

Source Of Income	Period of Time From To	Rate of Pay Monthly	Full	Partial/ Part-time
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

Regular Employment/Income

List Co-Applicant's Current Income

Name _____

Source Of Income	Period of Time From To	Rate of Pay Monthly	Full	Partial/ Part-time
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

Please Include All Income Sources: Self Employment, Employment Insurance; Student Loans/Allowances; WCB; Child Support/Alimony; Tips; Interest; Royalties; Pensions, etc.

VERIFICATION OF current INCOME AND most recent NOTICE OF ASSESSMENT WILL BE REQUIRED AS DEEMED NECESSARY

5.0 BARRIERS TO MARKET HOUSING

What factors have made it difficult to find safe, suitable and/or affordable housing in the open market. This could include things like difficulty finding housing suitable for a person with mobility issues, going through a family break up, medical issues or lack of transportation. Please explain how each factor has become a barrier to accessing market housing.

6.0 PLANS FOR FUTURE SUCCESS:

This program is designed to provide citizens with a hand up and is not a long term housing solution. The program encourages participants to save funds and to plan for future housing ownership. Programs like the Making Financial Cents program will assist participants in obtaining their goals and is mandatory upon signing of Lease. The FCSS program through the Town of Drayton Valley (Family and Community Support Services) may be a source of information for planning and obtaining your goals. The Urban Housing Program will provide you with an affordable home while you are working on your future plans for a three year period only. Please describe why you are interested in this program.

□ Making Financial Cents

□ Disability/Senior Consideration