



APPLICATION #: _____
BEDROOM SIZE: _____
SURNAME: _____

M'AKOLA HOUSING SOCIETY
M'AKOLA LEASEHOLD SOCIETY
RURAL NATIVE HOUSING

Tenant Application

Do you need help filling out this application? Please contact Tenant Counsellor at your local office.

The M'akola Housing Society is a non-profit society established to provide comfortable, affordable rental accommodation for families and single parent families who are of Aboriginal Ancestry. The information that is being requested is to help assist you in locating suitable accommodation to meet your current needs. The information in this form shall be kept in compliance with the Personal Information Protection Act.

To keep your application active in our filing system, contact your local office annually to keep your application current, or you will be taken off the waitlist.

Have you ever applied for M'akola in the past? yes no

When? _____ Under what name? _____

IF YOUR CONTACT INFORMATION HAS CHANGED, PLEASE INFORM US!

Main Office

2009 Fernwood Road
Victoria, BC V8T 2Y8
Tel: (250) 384-1423
Fax: (250) 381-1438
Toll-Free 1-877-384-1423

Nanaimo Office

22 – 3201 Shenton Rd
Nanaimo, BC V9T 5X6
Tel: (250) 756-4217
Fax: (250) 756-4262

Duncan Office

#26 – 3170 Gibbins Rd
Duncan, BC V9L 1G5
Tel: (250) 746-1785
Fax: (250) 746-1707

Port Alberni Office

17 – 3777 Argyle Way
Port Alberni, BC V9Y 8C7
Tel: (250) 723-9855
Fax: (250) 723-1744

Campbell River/Laketrail

47A – 300 Robron Road
Campbell River, BC V9W 5P2
Tel: (250) 923-4145 Fax: (250) 923-2597

A - HOUSEHOLD COMPOSITION

Applicant Information

Name:	Home #
Address:	Work #
City / Province	Message #
Postal Code	E-mail
Birth Date:	SIN:

Other Applicant information (if there are more than 5 people in your household, please attach information on a separate sheet of paper).

Full Name	Birth Date dd/mm/yyyy	Age	Gender M/F	Relationship to Primary Applicant
1.				
2.				
3.				
4.				
5.				

Do you expect your family size to change in the next 12 months? YES NO
 (Pregnancy, family leaving or joining)

Please list where you would like to live; towns, cities or specific complexes/buildings

Location:
Location:

How do you feel about living in a “dry” complex?

B – ABORIGINAL ANCESTRY

Are you Aboriginal Non-Aboriginal

Band Name:
Band Address:
Band Phone #:

C – DISABILITIES / HEALTH PROBLEMS

Please list any member(s) of your household with a significant disability / health problem that M’akola needs to be aware of.

Name	Disability	Wheel Chair Unit Required Yes / No
1.		
2.		

D – INCOME INFORMATION

List your gross monthly income (i.e. before deductions) from all members of your household and list the sources (i.e. income assistance, employment, E.I. pension)

Name	Income Source	Gross Monthly Income (\$)
1.		
2.		
3.		
4.		
Total Household Monthly Income:		\$

E – Have you at any time lived in subsidized housing? Yes No

If yes, what was the organization?		
What were the dates of Residency?	From:	To:
Under whose name was the tenancy:		

F – RESIDENCE HISTORY

Please list your two most recent residential addresses. Note: This information must be completed. If you need more space please attach a separate sheet of paper.

NOTE: Information MUST be completed

Residence #1

Address	Date From (dd/mm/yyyy) To: (dd/mm/yyyy)
City / Province	Name of Landlord
Postal Code	Landlord's Phone #

Residence #2

Address	Date From (dd/mm/yyyy) To: (dd/mm/yyyy)
City / Province	Name of Landlord
Postal Code	Landlord's Phone #

G – PRESENT ACCOMODATION

Please describe your present accommodation as completely as possible by filling in the information below:

Please choose one:

- Apartment
- House / Duplex
- Townhouse
- Other _____

Is your present accommodation?

- Housekeeping Room
- Basement Suite
- Room & Board
- Trailer
- Living with Family/Friends
- Hotel / Motel
- Emergency Shelter
- Other _____

Number of bedrooms your household presently occupies: _____

Your current rent amount:
Your current hydro bill:
Your current furnace oil/Teresa gas bill:

Is your bathroom: Shared Private

Does your present accommodations have:

Kitchen: Shared Private None

Laundry: Shared Private None

Outdoor Play Area: Yes No

Do you have any household pets? Yes No

If yes, please specify: _____

Are you willing to give up your pets? Yes No

H – REASON FOR MOVING

Are you under a 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, and give your explanation below:

If you are not under notice, why do you wish to move? (Please be specific attach an extra sheet for additional information).

Repairs Required? Yes No Children Allowed? Yes No

High Rent? Yes No Over Crowded? Yes No

I – PERSONAL DATA

Please list the names of three relatives or close friends we can contact in case of an emergency.

Name:	Relationship to you	Telephone #
1.		
2.		
3.		

Have you been convicted of an offense involving a child? Yes No

Comments:

Do you own a vehicle?

If yes, please describe: _____

J – DECLARATION

Please read carefully and sign this agreement

I/We declare:

- This is my application; and,
- All the information provided is correct and completed to the best of my knowledge and belief.

I/We Authorize:

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

I/We Understand:

- That in accordance with the PIPA Act, the information on this application may be shared with other affordable housing providers in order to increase my/our opportunities for rental geared to income housing;
- That this application does not constitute any agreement on the part of the Society and/or Housing Registry to provide me/us with rental accommodation;
- That it is my/our responsibility to advise the Society and/or Housing Registry of any changes to the information given in this application and to provide any supporting materials required for my/our application; and,
- That this application will remain on file for a period of twelve (12) months. If at any time during this period I/we move or need to update the information given in this application, it is my/our responsibility to contact M’akola Housing Society and make the necessary changes.

Signature of Adult Applicant	Date

M’akola Housing Signature	Date Application Received