

Ki-low-Na friend/hip Society

Housing Application

Please complete this application in full. Incomplete applications will not be considered!

This application form collects information for the following purposes:

- To determine eligibility for our housing
- To assess housing needs

Our housing units are affordable rental housing and subsidized. Utilities are **not** included in the rent. All tenancies are subject to the *BC Residential Tenancy Act* and regulations. Tenants are responsible for the full and timely payment of rent.

Our housing is available to all qualifying community members regardless of race, religion, gender, sexual orientation etc.

How the application process works:

- 1. All applicants must complete *Part 1: Pre-Eligibility Checklist* to determine if they are potentially eligible to apply for our housing. If applicants are potentially eligible after completing *Part 1*, an application must be completed and submitted along with any required documents.
- 2. All submitted applications will be reviewed by a selection committee. Applicants that meet eligibility criteria will be contacted for an interview. Only applicants selected for an interview will be contacted.
- **3.** An interview will be scheduled. All interviews are conducted during normal business hours (9am–4pm Mon-Fri) at the housing office.
- **4.** Successful applicants will be contacted to setup a move-in date or to be added to the wait-list.

Contacting the Housing Office:

Cell Phone: (250) 469-2330 Email: propertymanager@kfs.bc.ca

If you have any questions about this application or require assistance completing it, please contact the housing office.

Part 1: Pre-Eligibility Checklist

Р		•		elf-determination checklist by adding a tick to the appropriate ine if you are potentially eligible to apply for our housing.	
0	Yes	0	No	Are you a Canadian citizen, legal permanent resident of Canada or a refugee with a legal status to live in Canada?	
0	Yes	0	No	Are you a current resident of British Columbia?	
0	Yes	0	No	Are you 19 years of age or older	
If you	u answer	ed 'N	o' to aı	ny of the above questions, you will not qualify for our housing.	,
0	Yes	0	No	Do you have pets of any kind (including 'therapy animals' but not including guide animals certified under the <i>BC Guide Animal Act</i>)	
It	you ans	wered	d 'Yes'	to the above question, you will not qualify for our housing.	
	How	many	adults	(over the age of 19) will be residing in the unit?	
	How m	any c	hildren	(under the age of 19) will be residing int the unit?	
 Occupancy of all our housing units is subject to standards set forth by BC Housing and other governing agencies. All households must be able to abide by these standards. No more than two adults (over 19 years of age) per bedroom. No more than two adults in a studio apartment. Up to two minors (under 19 years of age) may occupy the same bedroom if: a. They are both of the same gender (if over the age of 6) b. They are of different genders (ONLY if under the age of 6) No minor may occupy the same bedroom as an adult. No minor may occupy a studio apartment along with an adult. With the exception of studio apartments, no rooms other than bedrooms may be used by any occupant as a bedroom space. No animals of any kind are permitted in any housing unit (with the exception of guide animals certified under the BC Guide Animal Act and regulations). No smoking is permitted in any buildings, common areas or balconies. Smoking is only permitted inside of designated smoking areas. This includes medicinal use of marijuana. 					
Are yo	-			d able to abide by all of these regulations? O Yes O No	
	ır you al	iswe	rea 'No	o' to this question, you will not qualify for our housing.	

Please complete the remaining sections of the application **only** if you qualify after completing this section.

Applicants must make less than the HIL's that are posted on BC Housing annually.

Part 2: Application for Housing

If you have completed a housing application with another housing provider or with the *BC Housing Registry*, please feel free to attach a copy of that application and only continue to fill in sections that request information not already provided.

Please use an additional sheet if you need more space.

1. Applicant(s)

Last name	First Name					Initial		
2. Contact Information	n							
		Home A	Address:					
Street Addres	S	Cit	у		Provinc	е	Posta	al Code
M	lailing Address	(if differ	ent from h	ome a	address	s):		
Street Addres	SS	City			Province		Postal Code	
		Phone	& Email					
Home Phone	Cell Phon	e	Worl	k Phor	ne		Email	
	*A	uthorize	ed Contact	·•				
Contact Name	Phone Number Relation		tionship	nship to Applicant				

^{*}If you provide an authorized contact, you are giving Ki-Low-Na Friendship Society permission to exchange information with that contact to maintain and update your information. To remove an authorized contact, please contact the housing office.

3. Household Information

a. List yourself and all other household members:

Last Name	First Name & Initial	Relationship to applicant	Birthdate (yyyy/mm/dd)	Age	Gender	*Born in Canada?

An adult household member (over 19 years of age) must have legal custody or guardianship of any household members under 19 years of age. Proof of custody may be requested.

Please provide copies of government-issued identification for all household members over 19 years of age.

b. For each household member not born in Canada, please specify their current

residency status in Canada.					

Please be prepared to provide documentation of legal residency or immigrant status upon request.

4. Residency History

a. Please provide information on where you have lived for the last five years, listing your current residence first.

Rental Address (street, city, prov.)	From (yyyy/mm/dd)	To (yyyy/mm/dd)	Landlord Name	Landlord Phone	Reason for Leaving

b. Please provide the residency history of all adults (19 years of age or older) in the household.

Rental Address (street, city, prov.)	From (yyyy/mm/dd)	To (yyyy/mm/dd)	Landlord Name	Landlord Phone	Reason for Leaving

Flease explain any ga	Flease explain any gaps in residency below.						

As part of the process of evaluating applicants, we will contact previous landlords.

$\boldsymbol{c.}$ Do you owe any money to $\boldsymbol{\mu}$	orevious landlords? O Yes	s O No			
If yes, what is the amou	unt owing and reason for debt?)			
Amount:	Reason:				
You must have a repayment	agreement in place and provide request.	a copy of the agreement upon			
d. Please provide information	about your current housing:				
O Rent -> Monthly re	nt: \$ Ow	n -> \$			
Are you currently in a fi	ixed-term lease? O Yes	O No			
If yes, what date does your lease end? (yyyy/mm/dd) Please be prepared to provide proof of rent/housing payment upon request.					
5. Household Income					
	e sources are determining fact nember over 19 years of age r				
	ources and gross (before taxes old members over 19 years of Income Source	,			
	□ Employment □ E.l. □ BC Benefits □ Pensions □ Other:	\$			
	□ Employment □ E.l. □ BC Benefits □ Pensions □ Other:	\$			
	□ Employment □ E.l. □ BC Benefits □ Pensions □ Other:	\$			
	□ Employment □ E.I. □ BC Benefits □ Pensions □ Other:	\$			
	□ Employment □ E.I. □ BC Benefits □ Pensions □ Other:	\$			
	□ Employment □ E.I. □ BC Benefits □ Pensions □ Other:	\$			
	Total gross monthly	\$			

household income:

b. Are there any other considerations regarding income, employment assets or income sources listed in a. that you would like us to be aware of as we consider your application? If					
so, please attach a separate sheet with any necessary information.					
Please submit proof of income with your application including:3 months bank statements					
from all accounts, recent (last two weeks) pay stubs, letters from current employers, proof of					
educational funding (for students only), or refugee sponsorship. If your application does					
not include proof of income documentation your application will not be considered.					
Proof of income and assets must be attached for all household members declaring					
income and/or assets.					
6. Additional Information					
a. Which housing project(s) are you interested in? (please list in order of preference)					
b. What size unit are you applying for?					
c. Do you have a floor preference? O Yes O No Floor Preference: (if yes)					
d. Do you need a disability suite?					
Do you have a live-in caregiver? (if yes)					
e. Is there any other information that you would like to provide in order for us to consider					
your application? If so, please attach a separate sheet with any separate information.					

7. References

As part of the assessment process, we will contact previous landlords and other individuals for references. In addition to your previous landlords listed in Section 4, please provide at least two personal references. They must be non-family members and have known you for at least two years.

Reference Name	Reference Phone

Please attach separate sheets with any necessary reference information.

Part 3: Limits to Services & Confidentiality

The Ki-Low-Na Friendship Society (KFS) provides affordable and subsidized housing on behalf of the BC Housing Management Commission. Information about your tenancy, including income and application verification, may be shared with their office and with the Aboriginal Housing Management Association (AHMA) who have been appointed to manage the agreement on behalf of BC Housing. Applications for rent subsidy will be uploaded to a shared database with BC Housing and AHMA for the purpose of managing the rental subsidy calculations.

- We must break confidentiality as governed by law in the following circumstances: a

 a. We must report incidents of child neglect or abuse (household members under the age of 19)
 - b. We must act to prevent a person from causing serious harm to themselves or others.
 - c. KFS files may be subpoenaed, and if so, we are bound by law to testify and/or surrender files.
- Some information is collected for required statistical reporting purposes to governmental and other agencies. No names or other identifying factors are attached to this information.
- 3. Some information is collected for the purposes of determining eligibility for housing and appropriate housing placement. This information will not be released to any third parties without the applicant's consent.
- 4. If any person(s) has an active, untreated medical disease that poses a threat to other tenants, KFS staff may have the duty to report this to public health authorities.
- 5. Housing staff may exchange information at case conferences. Any person present at such meetings is bound by confidentiality.

Applicant files and all contents are the property of KFS and will be stored for seven years as per operating agreement and by law as it relates to privacy and finance.

Part 4: Application Declaration

I/we declare:

- that this is my/our application; and
- all of the information contained within it, as well as attached with it, is correct and complete to the best of my/our knowledge

I/we authorize:

- the Ki-Low-Na Friendship Society (KFS) to make any inquiries that are necessary in order to verify information given in this application.
- KFS to receive and exchange with credit bureaus and my/our previous landlords, credit and other tenancy information about me/us, to be used in this decision-making process to provide me/us with housing.

I/we understand:

- that this application is not an agreement on the part of KFS to provide me/us with rental accommodation, or to assist me/us in any way to secure housing.
- that false information or false documentation provided by me/us will result in the application being rejected.
- that if I/we refuse an offer of housing, our application will be cancelled, and;
- that my/our application will be kept on-file for maximum of six months unless I/we contact the housing office to keep the application active for longer.

I/we have read and fully understand the provisions in Part 3.

This application must be signed and dated by any household members 19 years of age or older.

D-4-

Applicant Name(s) (Printed)	Signature of Applicant(s)	(yyyy/mm/dd)

Application Submission Instructions

The following documents <u>must</u> accompany this application in order to activate it:

- Proof of income, such as copies of pay cheque stubs, 3 months bank statements from all accounts showing direct deposits, letters from employers, proof of educational funding or refugee sponsorships etc.
- Copies of all bank statements and other documents from financial institutions showing the value of all assets for all household members over 19 years of age.
- Copies of identification (driver's license or other government-issued ID) of all household members over 19 years of age.

The following documents may need to be provided, upon request, to determine housing eligibility; however they do not need to accompany this application in order to activate it:

- Proof of custody of household members under 19 years of age.
- Copy of Canadian birth certificate(s) for all household members born in Canada.
- Copies of citizenship or immigration documents (for those born outside of Canada).
- Copy of most recent rent receipt, copy of current tenancy agreement stating current rent amount, or copy of documents stating current monthly mortgage payment.

Send completed applications with supporting documents to:

Mail:

Ki-Low-Na Friendship Society
Housing Applications
1745 Chapman Pl
Kelowna, BC V1Y 0E7

Email: propertymanager@kfs.bc.ca

In-person: 1745 Chapman Place, Kelowna BC OR 442 Leon Ave, Kelowna BC V1Y 6J3

Incomplete applications, or applications that do not have the required documents accompanying them, will not be considered.

For office use only:

Date Received:	Initial Approved:
Applicant Contacted Y/N:	Date Contacted:
Interview Y/N:	Interview Date:
On-file until (date):	
On-file until (date):	

Notes: