

## **Aboriginal Housing Society Application for Accommodation**

The Aboriginal Housing Society is committed to eradicating homelessness among Aboriginal people in Canada. Homelessness does not discriminate between race, gender, ethnicity, religious faith or relationship status. It is a fact that people of Aboriginal Heritage are subjected to higher levels of below standard, inaccessible and unaffordable housing than any other group of people in Canada. Our objective is to develop rental housing as well as educational tools and support services that will create opportunity for Aboriginal people to obtain adequate and affordable housing as a basic necessity, life skills development, increased educational opportunities, and practical experience in urban community living. Every effort will be made to assist Aboriginal people to move from long term rental tenancy toward increased opportunities to reap the rewards and prestige of being a Home Owner and building one's own equity. Components may include credit establishment or credit repair, down payment assistance and after—purchase homeowner mentorship.

Tenancy acceptance is primarily based on positive attitude, expressed education and/or employment goals and a willingness to live in a community with <u>Honesty, Patience, Respect and Compassion</u>. A successful tenant applicant has the desire to become involved in and participate in the learning opportunities and volunteer events sponsored by AHS and its partner organizations. The key is to understand and take advantage of the benefits of living in city/town communities. Anyone can live in a house, but it is your own personal attitude, motivation and commitment that make it "Koh Koonoon – Our Home".

Do you agree to CONTRIBUTE to the Positive Experience of our communities with others who are willing to make a difference by Honesty, Patience, Respect, and Compassion?





## Aboriginal Housing Society #22, 1102 – 5 Ave. North Lethbridge, Alberta. T1H 0M4

#### **Rental Qualification**

Applicants are required to meet certain criteria before residing in one of our units. Below is a list of our current qualifications. Prior to completing the application, please carefully review the following criteria to determine your eligibility.

#### √ Qualifications to become a Tenant:

- 1. All primary Applicants must be 18 years of age and provide photo ID (i.e. Indian Status Card).
- 2. Income Requirements:
  - a. Applicants must fall at or below the Core Net Income Threshold (CNIT) amounts to qualify for a:
    - i. 2 Bedroom: = > \$47, 500 combined household annual income.
    - ii. 3 Bedroom: = > \$63,000 combined household annual income.
  - b. An Applicant's monthly rent should NOT exceed 50% of their monthly income. Income must be verified by the two most recent pay stubs, letter of employment or letter of financial support.
    - i. For Applicants whose income does not meet this requirement a budget plan must be submitted to AHS for approval.
- 3. Applicants must have a reasonably good tenancy history and a good credit history.
- 4. Security Deposit must be paid in full prior to occupancy for a Tenancy Agreement can be made.

#### **V** Residential Content Insurance:

Tenants of Aboriginal Housing Society are required to purchase residential content insurance before moving into an AHS Unit. A copy of your Tenant Insurance will be added to your file.

#### **V** Rental Applications:

Applications and interviews are to be submitted in person and completed by each applicant without omissions or falsifications. Misleading information on an application or in the interview process will be considered a serious breach of contract and mistrust which will result in an application being denied or an eviction if a rental unit has been granted based on false pretenses.

#### **√** Attitude & Behavior:

First impressions are very important. We are looking for tenants who have a positive attitude, willing to accept the responsibility of being a good and contributing community member and are willing to set and achieve realistic personal, educational and financial goals. The first step to realizing change is awareness. Admitting to areas of weakness and focusing on positive change is essential to obtaining and maintaining a positive home environment. While in the office or at our rental communities, you must ensure that you monitor the behaviour of your guests or family members and promptly address any behaviour that is disrespectful or destructive. Children are expected to be children but parents are expected to take responsibility to correct any behavior that is disrespectful, destructive or harmful to other people or the property of AHS. There is no shame in having to take time and make effort to teach your children correct and respectful behaviour while in the AHS office or while being a tenant/guest at our property.

You must be willing to cooperate with AHS Staff and other tenants especially when conflict issues arise.

#### **√** Utilities:

Tenants are responsible for the payment of all utilities. All utilities must be signed up in the applicants name and provide AHS with a written confirmation letter from the Electric & Gas company (of their choice) that the tenant has signed up with. Once AHS has confirmation of an open utilities account, we then sign the contract with the selected tenant and tenancy can begin.

#### **√** Pet Policies:

AHS HAS A NO PET POLICY.

# Aboriginal Housing Society Tenancy- Housing College Application

| Date:                                     | Type of I     | Bedroom (AHS OFFICE): |                    |             |
|---|---------------|-----------------------|--------------------|-------------|
| 1. APPLICANT (Head of Household):         |               |                       |                    |             |
| Name:                                     |               | Date of B             | irth (YY/MM/DD):   |             |
| Current Address:# Street                  |               | City                  | Province           | Postal Code |
| Resident Ph. #:                           | Cell Ph. #: _ |                       | Work #:            |             |
| Status: First Nation Status               |               | Metis                 | Email:             |             |
| *How long have you occupied your Cur      | rent Address? | Non-Status            |                    |             |
| *Current Land Lord's Name, Phone Nu       |               |                       |                    |             |
| 2. Co – Applicant (Spouse):               |               |                       |                    |             |
| Name:                                     |               | Date of Birth (       | YY/MM/DD):         |             |
| Current Address:# Street  Resident Ph. #: |               | City                  | Province           | Postal Code |
| 3. Names of Additional Permanent          | Occupants:    |                       |                    |             |
| Name:                                     |               | AGE                   | Relationship to Ap | plicant     |
| 1   |               |                       |                    |             |
| 2   |               |                       |                    |             |
| 3   |               |                       |                    |             |
| 4   |               |                       |                    |             |
| 5   |               |                       |                    |             |

| 4. Why do you wish to move from your current address? |                                |  |  |  |
|---|--------------------------------|--|--|--|
|   |                                |  |  |  |
| 5. Do you require a 30 day notice?                    |                                |  |  |  |
| 6. Was an eviction notice given to                    |                                |  |  |  |
| If you answered yes, please explain br                | iefly why you were evicted?    |  |  |  |
|   |                                |  |  |  |
|   |                                |  |  |  |
|   | Available in order to move in? |  |  |  |
| 8. Current Living Accommodations:                     | ·                              |  |  |  |
| [ ] Property Owner                                    | [ ] Tenant of Private Landlord |  |  |  |
| [ ] Tenant of Housing Association                     | [ ] Living with Friends        |  |  |  |
| [ ] Living with Relatives                             | [ ] Motel/Hotel Accommodations |  |  |  |
| [ ] Emergency Shelter                                 | [ ] Transitional Home          |  |  |  |
| [ ] Homeless & Employed                               | [ ] Other                      |  |  |  |
| 9. Is a wheelchair or barrier free ac                 | commodation required?? YESNO   |  |  |  |
| If YES, Please explain.                               |                                |  |  |  |
|   |                                |  |  |  |
|   |                                |  |  |  |
| 10. References (Not Relatives):                       |                                |  |  |  |
| <b>A)</b> Name:                                       | Phone Number:                  |  |  |  |
| B) Name: Phone Number:                                |                                |  |  |  |

| l1. Emergency Contact Ir   | nformation:                        |   |  |  |
|----------------------------|------------------------------------|---|--|--|
| In case of emergency, who  | om may we contact if we are unab   | le to contact or notify?  |  |  |
| <b>1.</b> Name:            | Relationship:                      |   |  |  |
| Address:                   | Address:                           |   |  |  |
|                            |                                    | Cell Phone #:   |  |  |
| 2. Name:Relationship:      |                                    | Relationship:   |  |  |
| Address:                   |                                    |   |  |  |
| Day Phone:                 | Evening Phone #: _                 | Cell Phone #:   |  |  |
| AHS unit. A copy of your   | RCI will be added to your file sho | ee. You are required to have this in place prior to moving into an uld you be selected for an AHS unit. |  |  |
|                            |                                    |   |  |  |
| .3. If Applicant(s) are em | ployed please answer the follo     | owing questions:  |  |  |
| A) Applicant:              |                                    |   |  |  |
| ) Name of Employer/Comp    | any                                |   |  |  |
| ) Date Started Employmen   | t                                  | <del></del>   |  |  |
| ) Hourly Rate of Pay       |                                    |   |  |  |
| ) Number of Hours Weekly   | /Monthly                           |   |  |  |
| ) Length of time Employed  |                                    |   |  |  |
| 3) Co – Applicant:         |                                    |   |  |  |
| ) Name of Employer/Comp    | any                                |   |  |  |
| 2) Date Started Employmen  | <del>t</del>                       |   |  |  |

| 3) Hourly Rate of Pay                           |   |
|---|---|
| 4) Number of Hours Weekly/Monthly               |   |
| 5) Length of time Employed                      |   |
|   |   |
| C) Additional Applicant:                        |   |
| 1) Name of Employer/Company                     | - |
| 2) Date Started Employment                      |   |
| 3) Hourly Rate of Pay                           |   |
| 4) Number of Hours Weekly/Monthly               |   |
| 5) Length of time Employed                      |   |
|   |   |
|   |   |
| 14. Any additional comments you wish to report: |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |

### **15. INCOME INFORMATION:**

Monthly Total - All adult occupants who will be living in the AHS Unit need to report their total monthly income.

| TYPE OF INCOME  | APPLICANT | CO - APPLICANT | ADDITIONAL APPLICANT |
|---|-----------|----------------|----------------------|
| Employment Income/Salary<br>(Student Grant, E.I, A.I.S.H., S.F.I) | \$        | \$             | \$                   |
| Other Sources of Income<br>(Child Tax, Child Support, etc.)       | \$        | \$             | \$                   |
| TOTAL   | \$        | \$             | \$                   |

OVERALL TOTAL
\$

\*Please Note Applicants must fall at or below the <u>Core Net Income Threshold</u> (CNIT) Amount (s) to be eligible to qualify for an Aboriginal Housing Society Unit. Koh Koonoon ONLY

- 2 Bedroom \$47,500.00 Yearly Household Income.
- 3 B63,0om \$63,000.00 Yearly Household Income.

| *Income verification from each member of the household must be submitted with your application.       |   |  |  |  |
|---|---|--|--|--|
| Example of income: T1 Slip, T4 Slip and/or Employment Pay Stub  |   |  |  |  |
| 16. Pets are Strictly Prohibited ~ NO PETS ALLOWED ~  |   |  |  |  |
| 17. Check list:   | _ |  |  |  |
| ☐ Copy of Identification from all household Members including a copy of your Native Status Cards      |   |  |  |  |
| □ Income Verification from all Household Members. E.g. Students – Copy of your student funding forms. |   |  |  |  |
| □ Reference Letter from current or previous landlord  |   |  |  |  |
| □ Verification of Utilities   |   |  |  |  |
| 18. Acknowledgment of Expectations:   |   |  |  |  |
| I understand that:  |   |  |  |  |
| (Initial inside brackets)   |   |  |  |  |
| [ ] Smoking is not permitted inside the Residential Unit  |   |  |  |  |

| L | J       | Smoking is not permitted inside the Residential Unit   |
|---|---------|--|
| [ | ]       | Pets are not permitted   |
| [ | ]<br>ev | Intoxication resulting in a disturbance is a breach under the Tenancy Agreement and may result in iction                       |
| [ | ]       | Assault or Threatening Assault will result in a 24 hour Eviction Notice  |
| [ | ]       | Payment of rent is priority on or before the 1 <sup>st</sup> of each month and essential to my goal of home ownership training |
| [ | ]       | Involvement in criminal activity on complex property will result in an eviction notice with as little as                       |
|   | 24      | hour Notice  |

The applicant declares all above statements to be true and accurate. This information is confidential and will not be released to anyone outside of the Aboriginal Housing Society without the consent of the applicant or as may be required by Canadian or Provincial Statute.

| Signature     | Date |
|---------------|------|
| Printed Name: |      |
| Signature     | Date |
| Printed Name: |      |

\*\*\*\*It is very important that you <u>update your AHS Applications every 3 months</u> so your current information (phone numbers) are always up to date and we can contact you when needed. \*\*\*\*