

HOUSING & PROPERTY DEVELOPMENT



Application for Rental Housing Assistance

Effective December 18, 2014



Application for Rental Housing Assistance

Housing and Property Development - Contact Information - APPENDIX "A"

Contact Information: Kitsumkalum First Nation
Housing & Property Development
P.O. Box 544
Terrace, B.C. V8G 4B5

Telephone: (250) 635-6177

Fax: (250) 635-4622

Email: propertymaint@kitsumkalum.bc.ca

Housing Coordinator: Neil Okabe

Personal Applicant Information - Primary and Secondary Applicant

Primary Applicant (Full Name): _____
(First) (Middle) (Last)

Date of Birth: _____ Social Insurance Number: _____
(Day/Month/Year)

Secondary Applicant (Full Name): _____
(First) (Middle) (Last)

Date of Birth: _____ Social Insurance Number: _____
(Day/Month/Year)

What type and size of housing would best suit your needs? Please mark your preferred selections below, with 1 being your 1st choice followed by 2 & 3.

2 BDRM 3 BDRM 5 BDRM



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Questions & Answers - APPENDIX "B"

Who is eligible to receive housing assistance?

- * Applicants must be 19 years or older and a member of the Kitsumkalum First Nation.
- * Applicants will be required to provide verification of household income in order to confirm their ability to manage the monthly rental payments and other associated costs and charges.
- * Applicants are required to sign a financial disclosure form authorizing Kitsumkalum First Nation to verify income, credit history, etc.

Who is not eligible?

- * Any applicant with rental arrears and/or outstanding accounts with Kitsumkalum First Nation will not be considered until outstanding accounts are paid in full or, if they are currently in debt to the nation, that they have honored a repayment agreement for a minimum of six (6) consecutive months.
- * Applicants that have a history of poor tenancy (cited for rental agreement violations where notice to correct or vacate was issued) except where 5 years has passed and the applicant has documentation that confirms compliance with a rental agreement for a two (2) year period.
- * Non-member primary applicants.

Completing the Application

- * The information requested in this application is based on the housing policy approved by Kitsumkalum First Nation on December 18, 2014.
- * The purpose of the application is to collect information which will confirm whether the applicant(s) is/are eligible to receive housing assistance, and the priority of their request for housing assistance.



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Questions & Answers *Continued...*

- * The housing department has 30 days from the date the application is received to review/verify information provided and to conduct an in-person interview with applicants.
- * After confirming completeness/eligibility, applications will be reviewed by the selection committee at the next application selection meeting (held the first Tuesday of every month).
- * Where to send the completed application:
 - In-person at the housing office
 - By mail to: Kitsumkalum First Nation
Housing and Property Development
P.O. Box 544
Terrace, B.C. V8G 4B5
- * Please be sure that all information requested in the application is provided - if it is not, the application will be returned to you at your mailing address as noted.
- * For assistance in completing this form, please contact Kitsumkalum First Nation housing department at 250-635-6177.

How will you be notified about the status of your application?

Within 30 days of receiving your application, the housing department will send a written notice confirming receipt to the address noted on your application. The notice will confirm:

- a) If your application is complete, the proposed date for an in-person interview.
- b) If your application is incomplete/ineligible, the application will be returned along with details on the reason for return and/or information required.



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Applicant Information *Appendix "C"*

For Housing and Property Development use only		
Date Received: _____ By Hand ____ By Mail ____	Recorded: _____	Processed by: _____
Application complete?	Yes: _____ No: _____	Interview completed? Yes: _____ Date: _____ No: _____ Date: _____
Application eligible?	Yes: _____ No: _____ Details: _____	

KKHPD Review

Review Date: _____	File No.: _____	Points Awarded: _____
Application Approved?:	Yes: _____ No: _____ Details: _____	Confirmation letter sent? Yes: _____ Date Mailed: _____ No: _____

1. What is your current address?

2. What is your mailing address (if different from #1, above):



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Applicant Information *Continued...*

Street No. & Name/Box Number/R.R. #:

City/Municipality:

Territory/Province:

Postal Code:

3. Contact Information

Primary Occupant	Home Phone #	Work Phone #	Cell Phone #
Secondary Occupant			

4. Household Information

Please list the names of the individuals who will be living in the KKFN home. The first name on the list should be the primary occupant (head of the household). Under "Relationship to Primary Occupant" this could be spouse/partner, children/dependents (son, daughter), and other family member such as aunt, grandparent or someone not related to the primary occupant.

Name (First and Last Name)	Age	Male Or Female	Relationship To Primary Occupant	Band Member (yes/no)	Requires Disabled Access (yes/no)
1. Primary Occupant:					
2. Secondary Occupant:					
3.					
4.					



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Applicant Information *Continued...*

Name (First and Last Name)	Age	Male Or Female	Relationship To Primary Occupant	Band Member (yes/no)	Requires Disabled Access (yes/no)
5.					
6.					
7.					
8.					

5. Information on your current home

<p>Do you rent or own your home (please check one)?</p> <p>Rent <input type="checkbox"/> - Please identify amount of current rent \$ _____</p> <p>Own <input type="checkbox"/></p> <p>Other <input type="checkbox"/> - please describe (i.e.: temporary accommodation) _____</p>				
<p>If you rent your current home, please provide information on your current and last 2 residences</p>				
Current Address	From Date	To Date	Name of Landlord	Phone Number for Landlord
Next Address				
Next Address				

This section provides details on your current living situation as relates to the national occupancy standards. These standards note that a separate bedroom should be provided for:



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Applicant Information *Continued...*

- An adult couple,
- A single person 18 years or older,
- Children age 5 and over of the opposite sex (adults should not share a bedroom with children).

How many bedrooms in your current home?	
In your current home there are how many? a) Adult couples b) Single persons 18 or older c) Children 5 or older	a) _____ b) _____ c) females _____ males _____

6. Previous Housing Assistance

Have you or anyone in your household applied previously for Kitsumkalum First Nation housing assistance? If yes, when was your application submitted? _____	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you or anyone in your household received housing assistance from Kitsumkalum First Nation (please check one)? If yes, please explain _____	Yes <input type="checkbox"/> No <input type="checkbox"/>

7. Annual Household Income

As part of the application process for this housing program, you must provide



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Applicant Information *Continued...*

information on the total household; this is gross current year's income (before deductions) of everyone who lives in the home. **Please complete the chart below for every member of the household in the same order as the names listed under Item 4 of this application form.**

Please include proof of income from all sources or a copy of your latest income tax assessment.

	Source of Income	(1)	(2)	(3)	(4)	(5)	(6)	Total
1	Annual gross salary, wages, part-time earnings							
2	Child tax benefit							
3	Employment insurance benefits							
4	Social assistance, workers compensation, other benefits							
5	Old age pension, Canada pension, disability pension, veterans allowance							
6	Bank interest, investment income							
7	Alimony or child support payments							
8	Self-employed or seasonally employed earnings (use net income)							
9	Other income (i.e.: net room and board from boarders, please specify.							
Total income from all sources								



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Applicant Information *Continued...*

8. Household Debt

Identify all sources of debt as per each applicable member of the household. Please complete the chart below for every member of the household in the same order as the names listed under Item 4. of this application.

	Source of Debt	(1)	(2)	(3)	(4)	(5)	(6)	Total
1	Personal Loan Source: _____							
2	Vehicle No. 1 (If Applicable) Source: _____							
3	Vehicle No., 2 (If Applicable) Source: _____							
4	Visa, MasterCard or AMEX							
5	Retail Credit Card No. 1 Source: _____							
6	Retail Credit Card No. 2 Source: _____							
7	Other: _____							
8	Other: _____							
9	Other: _____							
	Total Debt from all Sources							

Note: Please ensure that all sources of debt are identified, including a current total amount of debt as per each source.



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Applicant Information *Continued...*

9. Financial and Other Information Disclosure

I/we are applying for housing assistance offered by Kitsumkalum First Nation. I/we authorize Kitsumkalum First Nation to receive and exchange credit/payment/other information with credit bureau and previous landlords about me/us to be used in the assessment of eligibility for this housing application.

Primary occupant name (please print)	
Signed	Date:
Social Insurance Number	

Primary occupant name (please print)	
Signed	Date:
Social Insurance Number	

10. Declaration

- a. Neither the primary or secondary occupant is in arrears on any Kitsumkalum First Nation payments, user charges or other debts.
- b. The information contained in this application is accurate. I/we understand that providing false or misleading information will result in the application being rejected.

Primary occupant (please print)	
Signed	Date:

Secondary occupant (please print)	
Signed	Date:

For assistance in completing this form, please contact Kitsumkalum First Nation housing department at (250) 635-6177.

IMPORTANT - Please submit the completed application and other related documentation (proof of income) in the self addressed envelope attached and seal the envelope to ensure that the information can be kept confidential.