



APPLICATION FOR ACCOMMODATION – COMMUNITY HOUSING

CONFIDENTIAL
PLEASE READ CAREFULLY

Frequently Asked Questions

*****Please read in detail...***

Do I have the right application form?

If you are... A Family or Single Parent and are Applying for Community Housing – please complete the application form.

Do I need to answer all of the questions on the application?

Yes, all questions and requested documentation must be supplied in order for the application form to be processed. If a question does not apply to your situation, mark N/A in the section. **Incomplete applications will not be processed.**

How do I get the application signed by a Commissioner for Oaths?

A Commissioner for Oaths administers oaths, and takes and receives affidavits, declarations, and affirmations that will be used in Alberta. Your local Town Office, Pharmacist, or lawyer's office are generally available to provide this service. Housing Coordinator: Valerie Puttick can provide this service - **by appointment only.**

Is there any other documentation that I need to provide?

YES, please refer to the attached checklist for required documentation

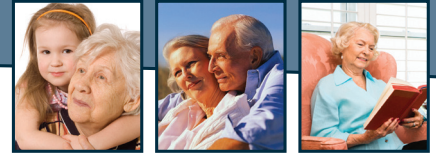
Where do I send the application once it is complete?

Please mail your completed application to: Mountain View Seniors' Housing
Attention: Admissions #301, 6501 - 51st Street Olds, Alberta T4H 1Y6,

How long will it take to be placed/approved?

All of our facilities have waiting lists and placement is based on what your priority rating score is. Please allow two weeks minimum processing time, however processing times vary.

APPLICANTS seen by Appointment Only



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Required Documentation Checklist

**ALL Financial documentation must have:
NAME, DATE, AMOUNT and SOURCE OF INCOME**

Documents confirming all Income including:

- o Recent Tax Years Notice of Assessment
- o Child Support Documentation (Court Order or MEP)
- o Child Tax Benefit
- o Student Loan Verification
- o AISH or Income Support (reporting card or eligibility form)
- o Employment Income (3 month worth of pay stubs or letter from employer)
- o Statutory Declaration (if documentation cannot be provided)

Documents confirming all Assets including:

- o RRSP's
- o RRIF's
- o Mutual Funds
- o Tax Free Savings Account (TFSA)
- o GIC's
- o Bank Account Statement
- o Property Tax Assessment / Realtor Listing
- o Inheritance / Royalties
- o Vehicle (purchase or loan agreement)

****2 References from previous landlords****

If required information is not provided, we will be unable to process your application

Further documentation may be required based on personal circumstances

CONTACT INFORMATION:

MOUNTAIN VIEW SENIORS' HOUSING
Email: admissions@mvsh.ca
Phone: 403-556-2957

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7. Do you own or rent your present accommodation? Own Rent
Present rent or house payment is \$ _____ per month, plus \$ _____ for heat,
\$ _____ for light, and \$ _____ for water and sewer.
8. If renting, name of present Landlord: _____
Address: _____
Telephone No: _____
9. Is your present accommodation a:
 House Townhouse Apartment Rooming House Hotel/Motel Other _____
10. Rooms in your present accommodation:
 Kitchen Living Room Dining Room Number of Bathrooms _____ Number of Bedrooms _____
11. Do you share any part of the accommodation with person(s) other than those listed in question #4?
 No Yes
- If yes, how many other person? Number of adult's _____ Number of Children _____. What part of the accommodation is shared? _____
- If you do not pay rent, do you contribute financially? No Yes
If yes, specify _____
12. Is any member of your family physically handicapped? No Yes
If yes, specify _____
Do you require a handicapped unit? No Yes
13. Reasons for wanting to move: _____

If you have been given a "NOTICE TO VACATE", please submit a copy of the notice stating the reason for eviction.
14. ASSETS:
Cash on hand: \$ _____ Cash in Bank Account \$ _____
Stocks, Bonds, Mutual Funds, etc. \$ _____ Real Estate \$ _____
Mortgage(s) \$ _____ Other Assets \$ _____
Car – Year/Make/Model: _____/_____/_____, _____/_____/_____

NOTE: Essential personal and household effects such as clothes, furniture, etc. are not included in assets.

Please feel free to describe your present accommodation and any information you would like Mountain View Seniors' Housing to be aware of. This space is provided for you to explain your reasons for applying for Community Housing, and will assist us in the approval of your application.

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15. Statement of Income:

NOTE: All information regarding your Family's income must be complete and accurate. Provide details of current employment held in the last twelve (12) months (begin with the most recent employer).

Applicant Name: _____ Social Insurance # _____ / _____ / _____

Company and Address	Employed		Rate of Pay		Hours per Week
	From	To	Gross Monthly	Hourly	

When did your spouse last work? Month _____ Year _____

Co-Applicant or Spouse: _____ Social Insurance # _____ / _____ / _____

Company and Address	Employed		Rate of Pay		Hours per Week
	From	To	Gross Monthly	Hourly	

Other Household Member: _____ Social Insurance # _____ / _____ / _____

Company and Address	Employed		Rate of Pay		Hours per Week
	From	To	Gross Monthly	Hourly	

Other Household Member: _____ Social Insurance # _____ / _____ / _____

Company and Address	Employed		Rate of Pay		Hours per Week
	From	To	Gross Monthly	Hourly	

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16. Have you received any other sources of income in the past twelve (12) months?
(Please indicate if Not Applicable – N/A)

Source of Income	Name of Family Member In receipt	Date From/To	Gross Monthly Income
Student Grants/Allowance			
Unemployment Insurance			
Worker’s Compensation			
Social Assistance / Income Support			
Child Support/Alimony Voluntary or Court Award			
Other Income (Tips, Interest, Royalties, etc.)			
Pensions: Department of Veteran Affairs			
Old Age Security			
Canada Pension - (Retirement, Widow & Orphan Benefits)			
Guaranteed Income Supplement			
Alberta Income Supplement			
Company or Group Pension			
Income from Self Employment			

DETAILS OF SELF-EMPLOYMENT MUST BE OUTLINED BY THE SUBMISSION OF A FINANCIAL STATEMENT
SUBJECT TO REVIEW BY MOUNTAIN VIEW SENIORS’ HOUSING

Note No pets will be permitted to reside in any housing managed and administered by the Mountain View Seniors’ Housing, unless approved in advance by MVSH under special circumstances.

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THIS APPLICATION WILL NOT BE PROCESSED, UNLESS ALL QUESTIONS ARE FULLY ANSWERED, MOST RECENT TAX YEAR'S NOTICE OF ASSESSMENT ENCLOSED, AND IS SIGNED BY A COMMISSIONER FOR OATHS.

I understand that this application does not constitute an agreement on the part of MOUNTAIN VIEW SENIORS' HOUSING, or its agents, to provide me with rental accommodation.

I further acknowledge the right of MOUNTAIN VIEW SENIORS' HOUSING, or its agents at any time prior to the execution and delivery to me of a lease hereby applied for, to withdraw, revoke, or cancel without penalty or liability for damages or otherwise, any acceptance or approval of this application previously made or given.

I hereby authorize MOUNTAIN VIEW SENIORS' HOUSING, or its agents, to investigate any or all of the statements made herein, 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 MOUNTAIN VIEW SENIORS' HOUSING or its agents, in writing, of any changes in family composition, gross family income, assets, employment or change of address, should they occur.

I ALSO AGREE THAT THE INFORMATION PROVIDED BY ME PERTAINS TO ALL PERSONS NAMED WITHIN THIS APPLICATION.

_____	_____
Applicant	Witness
_____	_____
Co -Applicant	Witness

(DOMINION OF CANADA) IN THE MATTER OF THIS APPLICATION FOR DWELLING PROVINCE OF ALBERTA)
ACCOMMODATION IN THE HOUSING PROJECT.

I/we, _____, of the _____ of _____,
in the Province of _____, do solemnly declare as follows;

1. That I am the applicant named in this application;
2. That the statements made by me in this application are to the best of my knowledge, information and belief, full and true in all respects;
3. That I have resided in Canada for ____ years of my life and in the Mountain View District for ____ years; And I make this solemn Declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of the "Canada Evidence Act."

Declared before me: _____)
at the _____ of _____)
in the Province of _____) Signature of Applicant Signature of Co-Applicant
this _____ day of _____, _____)

_____)
A Commissioner for Oaths in and for the Province of _____ My appointment expires on

_____)
Printed name of Commissioner for Oaths

Day Month Year

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Mountain View Seniors' Housing

Manager of Admissions

#301, 6501 - 51st Street

Olds, Alberta T4H 1Y6

Phone: 403-556-2957

Fax: 587-796-0775

Email: admissions@mvsh.ca

Website: www.mvsh.ca

Applicants seen by Appointment Only

THIS APPLICATION WILL NOT BE PROCESSED, UNLESS ALL QUESTIONS ARE FULLY ANSWERED, MOST RECENT TAX YEAR'S NOTICE OF ASSESSMENT ENCLOSED, AND IS SIGNED BY A COMMISSIONER FOR OATHS.

Applications will be kept on file for one year. If you wish to remain on the waitlist you must re-apply prior to the one year, or you will be removed from the waitlist.