



**NORTH
SHORE
DISABILITY
RESOURCE
CENTRE**

3158 Mountain Highway
North Vancouver
British Columbia V7K 2H5
Telephone 604-985-5371
Facsimile 604-985-7594
E-mail: nsdrc@nsdrc.org
Web Site: www.nsdrc.org

Application for Affordable, Accessible Housing

***Please read the NSDRC Eligibility Criteria prior to completing this form**

Date:

A. Applicants Name: (Person asking for accommodation)

Last Name	First Name	Title
		[SELECT]

B. Applicant's Contact Information

Street Address	City and Province	Postal Code
Mailing address (if different from above)		

Home Phone	Work Phone
Message Phone	Email
Contact Person (optional)	Contact Person Phone

C. Household Information (List all people applying for Affordable, Accessible Housing including yourself)

Last Name	First Name	Relationship	Birthdate (mm/dd/yyyy)	Age	Status in Canada
1.					
2.					
3.					
4.					

D. Do you expect an increase or decrease in the number of residents in your household in the next twelve months? Yes No If yes, please explain.

E. Next of Kin/Emergency Contact Living in the Lower Mainland:

Name	Address	Relationship	Home Phone	Alternate Phone

F. Status In Canada (Applicant)

How many years have you lived in Canada? _____ (years)

Are you a Canadian Citizen? Yes No

If No, Do you have Permanent Residence Status? Yes No

G. Residency History - Please provide information on up to three (3) previous landlords.

Rental Address	From Date mm/dd/yyyy	To Date mm/dd/yyyy	Landlord Name	Landlord Phone #	Reason for Leaving

H. Have you or any members of your household ever lived in subsidized housing? Yes No

If yes, provide information for all previous subsidized housing.

Name of Tenancy	Name/Address of Development	Reason for Leaving	Money Owing
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

I. Income Information (List gross monthly income (before deductions) for everyone age 19 and older.)

****PROOF MUST BE ATTACHED OR APPLICATION WILL BE RETURNED.**

First Name	Income Source (Employment, EI, Pensions, Income Assistance, Disability Benefits etc)	Gross Monthly Income

J. Asset Information (List the current value of all assets held by you and members of the household.)

****PROOF MUST BE ATTACHED OR APPLICATION WILL BE RETURNED.**

Asset type	Amount	Asset Type	Amount
Cash/Bank Balance	\$	RRSP/Annuities	\$
Stocks/Bonds/Term Deposits	\$	Residential Real Estate	\$
Other Assets	\$	Other Real Estate Holdings	\$

K. References (Example – current employer, friend or associate, other relative)

Name	Relationship	Phone Number
1.		
2.		
3.		

L. Type of Accommodation Required:

What size of unit are you applying for? (please check one)

One Bedroom Two Bedroom Three Bedroom _____ bedroom

Wheelchair accessibility required? Yes No

Wheel-in Shower Required? Yes No

Are modifications to the suite required to accommodate your disability? Yes No

If yes, please list:

M. Do you require attendant care? Yes No

N. Who will be living in unit?

Only me Spouse Friend Attendant
 Children Other, please specify _____

O. Do you own a car (s) Yes No

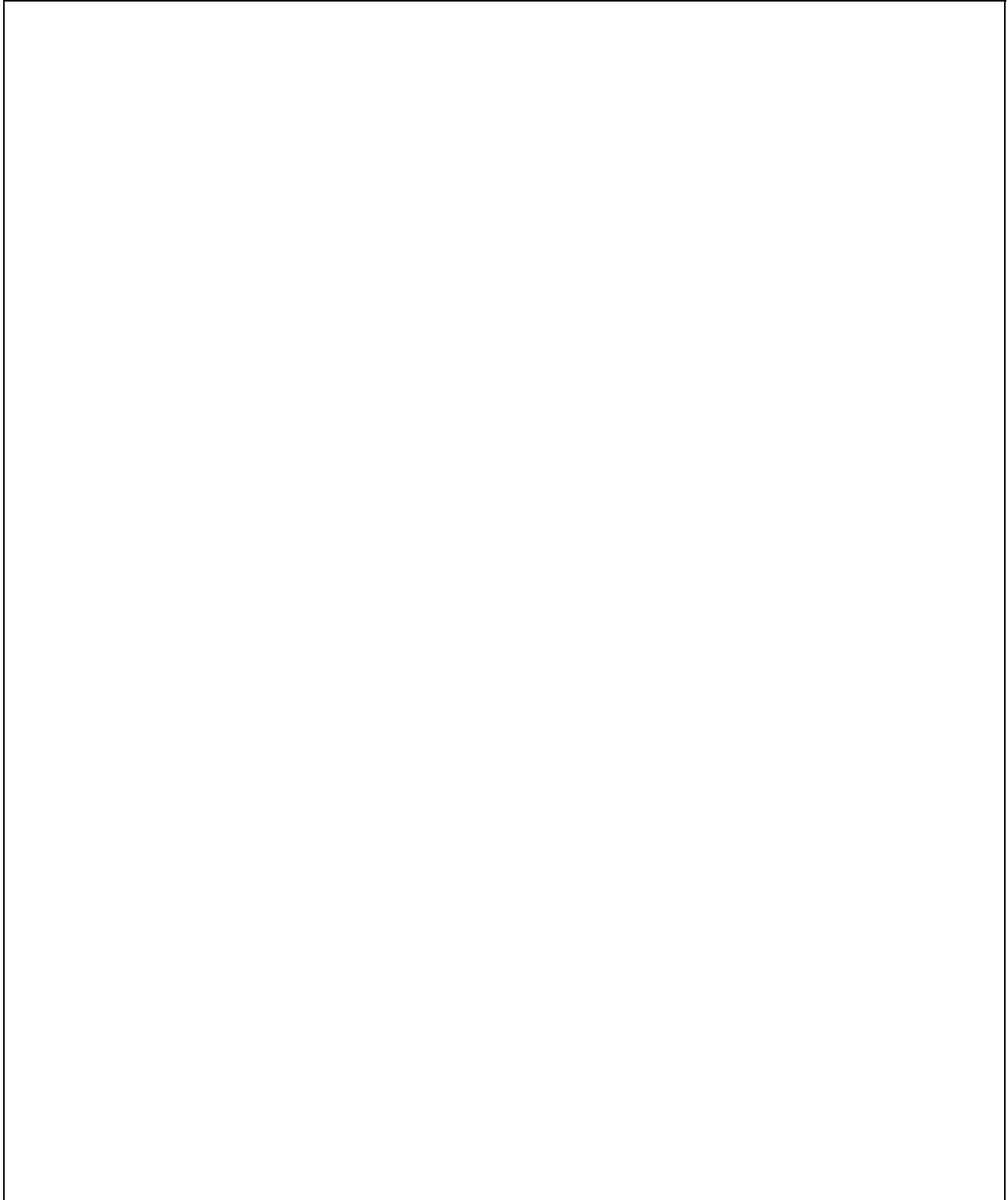
Make and License Plate Number: _____

P. Do you smoke? Yes No

Q. Do you have any pets? Yes No

If yes, please provide information for all household pets: _____

If you have any questions, comments or any additional information that you would like us to know, please add it here:

A large, empty rectangular box with a thin black border, intended for the user to provide questions, comments, or additional information. The box is currently blank.

APPLICATION FORM DECLARATION

(Please read and sign this statement)

I/We declare:

- this is my/our application; and
- all the information in it is correct and complete to the best of my/our knowledge.

I/We authorize:

- pursuant to the Freedom of Information and Protection of Privacy Act (FOI Act), The North Shore Disability Resource Centre to make any inquiries that are necessary to verify the information given in this application.
- pursuant to the FOI Act, any person, corporation or social agency to release to the North Shore Disability Resource Centre any information that is pertinent to the assessment of my/our application.
- members of the North Shore Disability Resource Centre to receive and exchange with credit bureaus and my/our previous landlords, credit and other information about me/us, to be used in the decision-making process to provide me/us with housing;
- Canada Revenue Agency (CRA) to provide verification of my/our income and details from taxation information;
- the Canada Pension Plan (CPP) releasing information regarding my/our income and medical information from my/our application for a CPP disability pension;
- Ministry of Employment and Income Assistance (MEIA) releasing information to the North Shore Disability Resource Centre regarding my/our income.

I/We understand:

- that this application is not an agreement on the part of the North Shore Disability Resource Centre to provide me/us with housing;
- that it is my/our responsibility to tell the North Shore Disability Resource Centre of any changes to the information given in this application and to provide any supporting materials as required;
- that false information given by me/us may result in my/our application being cancelled from consideration;
- that if I/we deliberately worsened my/our current housing situation (e.g. terminated a tenancy for no reason) that my/our application may not be accepted or my/our current living situation may not be taken into consideration.

**Application must be signed by everyone age 19 or older.
Checked Box is your signature.**

Print Name	I Agree with the above statements	Social Insurance Number	Date
	<input type="checkbox"/> Yes		
	<input type="checkbox"/> Yes		
	<input type="checkbox"/> Yes		

APPLICATION FORM CHECK LIST

Please review this check list and make sure that, when this application is sent in, all documents are included. Missing information will slow down the processing of your application.

Submit your completed application with supporting documents to:

The North Shore Disability Resource Centre
Attention: Housing
3158 Mountain Highway,
North Vancouver, BC, V7K2H5

OR

Email: k.miles@nsdrc.org (Supporting documents may be scanned and attached or submitted separately)

OR

Fax: 604-985-7594

Identification and Proof of Status in Canada for all Household Members

- Copy of Canadian birth certificate (s) for all family members born in Canada; and
- For family members not born in Canada, copies of citizenship papers or immigration documents. Acceptable proof includes copies of:
 - Record of Landing (IMM1000); or
 - Confirmation of Permanent Residence (IMM5292); or
 - Permanent Resident Card (both sides).

Proof of Current Address or Rent

- Copy of current rent receipt or recent rent increase notice; or
- Copy of lease or tenancy agreement showing rent amount.

Proof of Income and Assets

- If receiving income assistance from the Ministry of Employment and Income Assistance (MEIA): copy of cheque stub or confirmation of monthly assistance from your worker at MEIA.
- If employed; proof of current gross monthly income (last three consecutive cheques stubs or letter from employer).
- Copies of cheque stubs, bank statements showing direct deposit of pensions or other confirmation of income for any other income source.
- Copies of bank statements or letters from financial institution stating value of asset(s).
- Property tax assessments for value of property owned and proof of outstanding mortgage(s) if you own property.
- Proof of student status for adults aged 19 or older who are full-time students.