

Westlands Non-Profit Housing Cooperative.

55 + Housing Cooperative - (The Westlands at Oddy)

c/o Murdoch Management 757 Henderson Highway, Winnipeg, MB. R2K 2K7

The Westlands Non-Profit Housing Co-op is a 55 plus housing cooperative with 36 units to address a historic shortfall of quality seniors housing in the Brooklands and Weston area.

In order to take occupancy, resident members of the Co-op are required to make one \$1,000 "Co-op share purchase" (treated like a damage deposit). The first \$10 of this amount is a Co-op Membership Share and allows you to vote at the meetings of Co-op Members. The balance of \$990 is the share amount required before the Co-op provides possession and is used like a damage deposit in a rental apartment. It is returned upon move out when there is no damage or balance owing.

Since the government plays a major role in financing this project – the documents noted in the application are required to be completed in full. The required copy of your "Revenue Canada Option C Print Out" – is available free to you by calling Revenue Canada 1-800-959-8281 and simply asking for your Option C Printout. This information will be managed in the strictest confidence by our professional property managers and in accordance with Canadian Law.

Income Limit: / Rent Supplement: As an affordable Not-For-Profit housing cooperative, there is a maximum total household income limit set yearly. As well, some suites within the co-op are eligible for rent supplement assistance. Please contact Murdoch Management for more information.

If you are interested in being put on the waiting list, we need you to complete the attached "Application for Occupancy" and return it to our property manager at Murdoch Management (757 Henderson Highway, Winnipeg, Manitoba Canada R2K 2K7). Please also include your preference for a 1 or 2 bedroom suite. You may put both if you like.

If you have questions please call Murdoch Management Inc.,

at 204.982.2000 (toll free 1.800.543.6118).

Westlands Non Profit Housing Cooperative

50 Oddy Street, Winnipeg, Manitoba

CONFIDENTIAL APPLICATION for Membership and Housing.

Return to: 757 Henderson Highway, Winnipeg MB, R2K 2K7

Or Fax to: 204-669-4509

The following information is required from all applicants to determine eligibility for housing. **Incomplete applications cannot be processed.** Acceptance of the application is subject to eligibility and the availability of accommodation. All information is kept in strict confidence in accordance with the Personal Information Protection and Electronic Documents Act. If you have any questions contact Dennis at Murdoch Management: 204-982-2014 or Toll Free at 1-800-543-6118. The fax number is 204-669-4509.

PLEASE PRINT

INFORMATION ABOUT YOU:

Full Name: _____
First Name Middle Name Last Name

Mailing Address: _____ **Postal Code:** _____

Phone: (home) _____ (work) _____ (cell) _____ (other) _____

Social Insurance Number: _____
(to obtain credit report – we treat all information confidentially although this is not a mandatory requirement)

Date Of Birth (month-day-year): _____
(One household occupant must be at least 55 years of age, or if under 55, provide a physician's note advising that due to your medical condition, your doctor recommends you to live in this 55 plus complex)

Canadian Citizen : _____ **Landed Immigrant:** _____ **Worker's Visa:** _____

INFORMATION ABOUT THE PERSON WHO WILL LIVE WITH YOU (If applicable):

No One Will Live With Me (check if this applies): _____ - or -

Full Name: _____
First Name Middle Name Last Name

Mailing Address: _____ **Post Code:** _____

Phone: (home) _____ (work) _____ (cell) _____ (other) _____

Relationship To You (wife/husband, care-worker etc.): _____

Social Insurance Number: _____
(to obtain credit report – we treat all information confidentially although this is not a mandatory requirement)

Date Of Birth (month-day-year): _____

Canadian Citizen : _____ **Landed Immigrant:** _____ **Visa:** _____

1. CURRENT and PAST ADDRESS:

How long have you lived at this current address? _____ **Are you renting?** _____

If you are renting at this address how much rent do you pay for rent? _____

(If applicable) Landlord's Name, Address, and Phone: _____

Please provide your past address as well and the length of time at this address:

2. FINANCIAL INFORMATION:

Please report the total gross household income (income before tax deductions) of ALL members of your household who will be living in the new apartment. If you receive income from more than one source, please list each source separately. Attach an additional sheet if necessary.

<u>First Name</u>	<u>Last Name</u>	<u>Monthly Income Amount</u>	<u>Source</u>
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Person 1 _____

Person 2 _____

Typical Sources of Income are:

*Employment income
Employment Insurance
Interest from Investments*

*Employment & Income Assistance
Pensions
Canada Student Loans*

*Self-Employment
Band Assistance
Insurance Settlement*

You must attach to this application a certified copy of the most recent income tax report called an (Option C Printout) for each household member intending to live in this new apartment. This report is available free to you - by calling Revenue Canada (1-800-959-8281) and asking for your Option C Printout.

3. ADDITIONAL INFORMATION:

Which bedroom size would you prefer, 1 Bedroom _____ 2 Bedroom _____

If you wish a 2-bedroom suite and are paying "market" rent you are still required to provide an Option C Printout for each household member intending to live in the new apartment. If you wish a 2-bedroom and also wish to receive a "subsidized rent" (27% of your income for eligible households) you will be required to provide a letter from your physician confirming you require a 2-bedroom suite for medical reasons.

4. DECLARATION:

I/We understand that consideration of others is paramount. Any actions that negatively affect others enjoyment of the premises may result in termination of my occupancy. I/We undertake to create and maintain a safe, secure environment in the premises. I/We understand that this positive environment is my/our responsibility to uphold with my/our family members as well as my/our guests. I/We do solemnly declare that throughout the term of my/our lease at Westlands Housing Co-op I/we will not have a principal place of residence elsewhere in Canada. **I/We understand that cooperative occupant members are required to provide a minimum of 3 full calendar months notice in writing in advance of vacating the premises and that failure to provide adequate notice will result in a charge for 3-months housing occupancy charges (rent).**

I/We declare that all the information in this application is correct and hereby authorize the Cooperative and/or its Agent to verify any or all of the information contained herein.

DATE:

SIGNATURE:

Applicant Name (Print)

Applicant signature

Co-Applicant Name (Print)

Co-Applicant signature