

Application for Housing Access Housing Cooperative

2838 East 7th Avenue, Vancouver, BC V5M 1T9
Telephone/Fax: 604.254.4919

Thank you for your application to Access Housing Co-operative. We are a diverse community of people who administer ourselves in the context of established and applicable rules, policies and legislation. We welcome households of any size and all cultural backgrounds. Participation is mandatory. Pets are allowed. Access Housing Co-operative is not part of BC Housing. Subsidy is limited and may not be available at the time of your application.

Please answer all of the following questions. Print clearly and, if you need extra room, attach another sheet to the application.

Please mark unit size required: Bachelor ___ 1BR ___ 2BR ___ 3BR ___ 4BR ___

Name of Primary Applicant: (the person designated as “principal” member)

Last name	First Name	Mr.	Miss	Mrs.	Ms.
Home Phone	Email address				
Cell phone	Language(s) spoken				
Work Phone:					
Address: suite, number, street, city, BC, postal code (include mailing address if different)					
Current Employment: (Company / Address)					
Title	How long?	Full / Part-time			
Previous employment: (Company / Address)					

Name of Co-Applicant: (if any)

Last name:	First name	Mr.	Miss	Mrs.	Ms
Home Phone	Work Phone	Email:			
Cell phone	Language(s) spoken				
Address: suite, number, street, city, BC, postal code (including mailing address if different)					
Current Employment: (Company / Address)					
Title	How long?	Full / Part-time			
Previous employment: (Company / Address)					

Access Housing Co-op

Household Composition (List yourself on line 1, then all other persons who will be living with you. If there are more than 6 people in your household, attach the extra names on a separate sheet)

Last name, first name	Birthdate d/m/y	Gender	Relationship to Applicant
1			Applicant
2			
3			
4			
5			
6			

Parking Will you require a parking spot? ___Yes ___No

Residency History: Please list your address(es) for the past 3 years. Use a separate sheet if you need to

Address	From Date	To Date	Name of Landlord	Landlord Phone
Address shown above (current)		Present		

Are you under notice to end your present tenancy? Yes No

If YES, you must attach a copy of the legal Notice to End a Residential Tenancy from your landlord.

What are your reasons for wanting to live in Access Housing Co-operative?

Do you know anyone who lives in our Co-op and, if so, whom?

What is your experience or understanding of living in a housing co-operative:?

Volunteer experience and co-operative involvement

What volunteer or community service experiences do you have?
What kinds of skills do you have that you could volunteer to the co-op, as part of the participation requirement (eg. Chairing meetings, household repair skills, gardening, note-taking, book-keeping, etc):?

Which of the following co-op committees and activities are you willing to participate in? (Training and education for co-op board and committee work is available)

- | | | |
|---|---------------------------------------|--|
| <input type="checkbox"/> Board of Directors | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Newsletter |
| <input type="checkbox"/> Member Recruitment/Selection | <input type="checkbox"/> Finance | <input type="checkbox"/> Policy Review |
| <input type="checkbox"/> Landscaping | <input type="checkbox"/> Work Parties | <input type="checkbox"/> Social Events |

Other (please specify) _____

Personal References

Please Provide the names of two people (not related to the applicant/s) who can be contacted to provide a personal reference	
Name of Reference	Phone Number

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Income Information: List Gross Monthly Income (before deductions) from all sources, for all household members age 19 and over.

First Name	Source (i.e. employment, EI, pensions(s), BC Benefits, etc.)	Gross Monthly Income (\$)
1.		
2.		
3.		
4.		
5.		
Total Gross Monthly Income for Household		

DECLARATION: Please read and sign this statement. Please note that “We” is understood if there is more than one applicant

I/we understand that this application does not mean the Access Housing Cooperative will provide me/us with housing. I/we confirm that the information in this application is true, correct and complete. I/we agree to advise the Access Housing Cooperative of any changes to the information in this application, and to provide any supporting materials needed for my/our application.

I/we understand that if I/we am/are accepted as a member(s), I/we will be expected to subscribe for shares in the Cooperative and pay towards the shares according to a payment schedule acceptable to the Cooperative.

I/we understand and accept that according to the structure of co-op living and the lease, I/we will sign before move-in, it is mandatory at Access that I/we contribute to the successful running of the co-op by attending as many general meetings as possible and by participating in the general maintenance of the co-op by actively serving on the committees of my/our choice.

I/we give the Access Housing Cooperative or its agent my/our consent to verify the information in this application. I/we authorize any person, corporation or social agency to release any information, including financial information, related to my/our application to the Access Housing Cooperative. I/we understand any attempt to mislead the co-op by giving false information, could result in my/our application for membership at Access being denied.

Signature of Applicant	Date
Signature of Co-applicant	Date

Return application to: Access Housing Cooperative
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 Vancouver, BC V5M 1T9