

# TSLEIL-WAUTUTH NATION HOUSING APPLICATION

Date: \_\_\_ / \_\_\_ / \_\_\_

## APPLICANT INFORMATION

NAME: \_\_\_\_\_ STATUS #: \_\_\_\_\_  
LAST FIRST INITIAL

NAME: \_\_\_\_\_ STATUS #: \_\_\_\_\_  
LAST FIRST INITIAL

TYPE OF HOUSING APPLIED FOR (More than one type may be applied for)

Social Housing:  Individual Mortgage:  Rental Apartment:

How many parking stalls do you need? \_\_\_\_\_

How many vehicles do you have? \_\_\_\_\_

## 1. GENERAL

### 1.1 Accuracy and Completeness

All questions in the application must be answered completely.

All questions must be answered accurately. Any misleading information will result in the application being disqualified at the time the inaccuracy is discovered. If you have any questions, please talk to the Housing Officer.

### 1.2 Review

When the application has been submitted to the Housing Officer, the application will be reviewed with you. Both the Applicant and the Housing Officer must sign the bottom of the application stating the application has been reviewed before it can be accepted.

### 1.3 Confidentiality

All application information is for the sole purpose of assisting in the allocation of new housing. All information will be held in confidence by the Housing Office.

### 1.4 Renewal

Applications must be renewed annually. Applications over 13 months that have not been updated or renewed will be considered inactive. Renewing housing applications annually allows for housing need and situation to be reflected accurately, keeps contact information current and demonstrates interest in obtaining housing on reserve.

**2. HOUSING INFORMATION**

**2.1 Residence in the last 5 years, beginning with current**

Address	Landlord	Phone #

**2.3 Previous Application**

Have you made a previous application for a house?      Yes       No

If YES, when? First: \_\_\_\_\_ Most recent: \_\_\_\_\_

Copy on file? (Housing Officer)      Yes       No

**2.4 Home Ownership**

Do you presently own a home?      Yes       No

If YES, what is the address? \_\_\_\_\_

**2.5 Current Occupancy**

How many bedrooms does the house where you are living have? \_\_\_\_\_

How many people live in the house?      Adults \_\_\_\_\_      Children \_\_\_\_\_

**2.6 In-Home Care**

Will you be providing in-home care for a family member, relative, or friends in the house?

Yes       No

If YES, for whom, and what level of care? \_\_\_\_\_

**2.7 Disability**

Do you have a medical designation as a Person with a Mobility Disability with markedly or significantly restricted mobility for a prolonged period of time (at least 6 months, an official medical / doctor document is required).      Yes       No

**2.8 Occupancy**

The house being applied for will be occupied by the following people (list all proposed occupants and where they presently reside:

Name	Age	Sex	Current Residence

**Pets:**

Type of Animal	Age	Sex	Name and Description (weight, size, colour, etc.)

**2.9 Foster Care**

Do you expect to apply to be registered as a Foster Home?    Yes                       No

Do you anticipate having children live with you under GFA?    Yes                       No

How long do you expect to be a foster parent or under GFA? \_\_\_\_\_

**2.10 At Risk For Fleeing Violence**

Are you a TWN member in need / desire of social services (ex. Mental Wellness) or have children needing social services?    Yes     No

**2.11 Other Comments Regarding Housing Information**

Write down any other comments that you feel are important in applying for a house. Include any details regarding current living conditions. Please list any personal references you wish to include if you don't have three or more employer references. **Attach other sheet if necessary.**

**3. PERSONAL INFORMATION**

**3.1 Contact Name and Address**

Name of Applicant \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Name of Applicant \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ House No. \_\_\_\_\_  
 \_\_\_\_\_ Email \_\_\_\_\_

**3.2 Dependent Children**

Name (First, Initial, Last)	Age	Relationship (Natural, Foster, GFA)
1.		
2.		
3.		
4.		
5.		

**3.3 Adult Dependents (other than Applicants)**

Name (First, Initial, Last)	Age	Relationship to Applicant(s)
1.		
2.		
3.		
4.		
5.		

**3.4 Marital Status**

1. Married       2. Single parent       3. Common law       4. Divorced/separated   
 5. Single       6. Widowed

**3.5 Employment and Other Income**

**3.5.1 Employment**

1. Employer's Name \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Address \_\_\_\_\_  
 Your occupation \_\_\_\_\_ Rate of pay: \$ \_\_\_\_\_ per \_\_\_\_\_  
 Dates: Start \_\_\_\_ / \_\_\_\_ / \_\_\_\_      End \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Revised 05/2022      Applicant \_\_\_\_\_      RM File No. \_\_\_\_\_

2. Employer's Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_

Your occupation \_\_\_\_\_ Rate of pay: \$ \_\_\_\_\_ per \_\_\_\_\_

Dates: Start \_\_\_\_/\_\_\_\_/\_\_\_\_ End \_\_\_\_/\_\_\_\_/\_\_\_\_

3. Employer's Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_

Your occupation \_\_\_\_\_ Rate of pay: \$ \_\_\_\_\_ per \_\_\_\_\_

Dates: Start \_\_\_\_/\_\_\_\_/\_\_\_\_ End \_\_\_\_/\_\_\_\_/\_\_\_\_

**3.5.2 Other income**

Employment Insurance: 1. Yes  If yes, biweekly income \_\_\_\_\_ 2. No

Income Assistance: 1. Yes  If yes, monthly income \_\_\_\_\_ 2. No

Pensioner: 1. Yes  If yes, monthly income \_\_\_\_\_ 2. No

Education Living Allowance 1. Yes  If yes, monthly amount \_\_\_\_\_ 2. No

Student Loan 1. Yes  If yes, annual amount \_\_\_\_\_ 2. No

**Proof of Income** (Proof required for every household member who is age 19 or older). Must include both with application:

Current valid identification: Status card, driver's license, passport, or BC Health Card. (minimum one member on application must be a TWN member and provide a current status card)

2021 Income (2021 Notice of Assessment and all T-slips)

**3.6 School**

Attending school, college, university: 1. Yes  How many years left \_\_\_\_\_ 2. No

**3.7 Present Monthly Housing Costs**

Rent \_\_\_\_\_ BC Hydro \_\_\_\_\_ Service Charges (water, sewer) \_\_\_\_\_

Phone \_\_\_\_\_ Fuel \_\_\_\_\_

**4. SIGNATURES**

I/We hereby certify that the information in this application is accurate and true.

This application has been reviewed with the Housing Officer.

**SIGNED:**

APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

Please update the application whenever there are any changes in your family or housing situation.

This application has been reviewed and received. A copy will be given to the Applicant(s).

HOUSING OFFICER: \_\_\_\_\_ DATE: \_\_\_\_\_

**How to Submit Application:**

**Email application to [housing@twnation.ca](mailto:housing@twnation.ca) or drop off/mail at Reception, to the attention of Housing, at the Administration Building (3178 Alder Court, North Vancouver, BC, V7H 2V6).**

[\[Click Here to Email Directly\]](#)