

Gimli West Apartments.

Affordable not-for-profit rental housing

Gimli West Apartments

C/o Murdoch Management 757 Henderson Highway, Winnipeg, MB. R2K 2K7 Tel 204-982-2000, Fax 204-669-4509

Feb 2013

Re: New Affordable Not-for-Profit Rental Apartment in Gimli – Autumnwood Drive.

The Gimli West Apartments project is under construction! The current anticipated Occupancy is early Spring 2014 (this may change as construction progresses).

The completed project will provide a mixture of 1-bed, 2-bed, and 3-bed, fully self-contained and serviced apartments. As well, the building will be a three-storey elevatored building, with secure entrances and exits and modern fire safety systems. The grounds will be landscaped and accommodate powered surface parking. This project will be heated and cooled by a modern commercial geothermal heating and cooling system.

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.

Rent: The initial rents shall be the "Median Market Rent" as set by the Province of Manitoba. At this time these rents are: 1-bedroom suite = \$643/mth, 2-bedroom suite = \$778/mth and 3-bedroom suite = \$1,015/mth. These rents do not include parking (\$12/mth), TV (negotiating a bulk price), or Phone (your cost). However, they do include heat, light, power, sewer and water, property taxes, garbage removal, regular building and grounds maintenance. Common laundry will be available on site (pay-as-you-go).

<u>Income Limit</u>: There is a maximum total household income limit (set by the Province of Manitoba). The 2012 gross combined household income limits were \$48,454 (households without dependents) and \$64,606 (households with dependents). If the household has a disability, or other medical issue confirmed by a "doctor's letter" then the upper income limit can be exceeded (these limits can change from time to time).

<u>Rent Supplement</u>: If you are unable to afford the Median Market Rents outlined above, you may be eligible for 'Rent Supplement' (tenant pays 27% of income as residents rent portion). This assistance may be available to you if your gross household income is below \$25,500 (1-bed eligible); \$31,000 (2-bed eligible); and \$40,500 (3-bed eligible). Proof of income is required.

If you are interested in moving into the completed project, we need you to complete the attached "<u>Application for Occupancy</u>" and return it to our property managers Murdoch Management *(757 Henderson Highway, Winnipeg, Manitoba Canada R2K 2K7)*. Please also indicate/confirm your 1st 2nd and 3rd choice of suite (use the suite numbers from the brochure) on the form (can fax form to 204-669-4509).

If you have questions please call Brenda Gair at our property managers office

Murdoch Management Inc, at 204.982.2006 (toll free 1.800.543.6118).

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CONFIDENTIAL APPLICATION for Membership and Housing. Return to: 757 Henderson Highway, Winnipeg MB, R2K 2K7 Or Fax to: 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 Murdoch Management property managers at (204) 982-2000 or (1-800-543-6118 toll free) – **(Fax 669-4509).**

PLEASE PRINT **INFORMATION ABOUT YOU:** Full Name: First Name Middle Name Last Name Post Code: Mailing Address:_____ Phone: (home) (work) (cell) (other) Social Insurance Number: _ (to obtain credit report and to obtain new address after move-out if not provided) Date Of Birth (month-day-year): Canadian Citizen :_____ Landed Immigrant:_____ Visa:____ **INFORMATION ABOUT 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 Post Code: Mailing Address: Phone: (home) (work) (cell) (other) Relationship To You (wife/husband, care-worker etc.): Social Insurance Number: _____ (to obtain credit report and to obtain new address after move-out if not provided) Date Of Birth (month-day-year): Canadian Citizen : Landed Immigrant: Visa: Dependents Name, Gender (M/F), Date of Birth:

1.	CURRE	ENT ADDRESS:					
		How long have you lived at this current address? Are you renting?					
		you are renting at this address how much rent do you pay for rent?					
(If applicable) Landlord's Name, Address, and Phone:							
	(п аррі	applicable) Landiold's Name, Address, and Filone					
2.	Please who wi	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.					
		First Name	Last Name	Monthly In	ncome Amount	<u>Source</u>	
	Person	1				<u>-</u>	
	Person	2					
	Person	3	·		·	·	
	Person	Person 4					
	Em Em	Sources of Income are: aployment income apployment Insurance erest from Investments	Employment & Incom Pensions	e Assistance os	Self-Employment Band Assistance Insurance Settlement		
3.	You must attach to this application a <u>certified</u> copy of the most recent income tax report cal an (<u>Option C Printout</u>) 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 ask for your <u>Option C Printout.</u> 3. <u>ADDITIONAL INFORMATION:</u>						
	Which suite number is your 1 st choice 2 nd choice 3 rd choice						
	If you wish a 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.						
4.	DECLA	DECLARATION:					
	premises environn my/our f minimu	/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 understand that tenants are required to provide minimum of 2 full calendar months notice in writing in advance of vacating the premises and that failure to provide adequate notice may result in a charge for 2-months rent.					
		We declare that all the information in this application is correct and hereby authorize the Gimli Non Profi lousing Corporation and/or its Agent to verify any or all of the information contained herein.					
_	DATE:		SIGNATU	SIGNATURE:			
	Applican	Applicant Name (Print)		Applicant signature			
	Co-Applicant Name (Print)		Co-Applica	Co-Applicant signature			
	Office us	Office use only:					