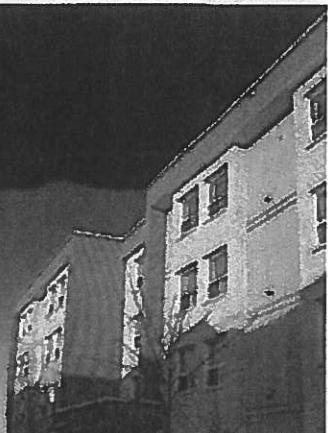




Friends Housing Inc.



CONFIDENTIAL APPLICATION FOR MEMBERSHIP & OCCUPANCY

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 Canadian Personal Information Protection and Electronic Documents Act. If you have any questions contact the Property Management office at (204) 982-2000.

PLEASE PRINT CLEARLY

1. INFORMATION ABOUT YOU (The Applicant):

FULL NAME: _____
First Name Middle Name Last Name

ADDRESS: _____ POSTAL CODE: _____

PHONE : _____ (residence) _____ (other)

SOCIAL INSURANCE NUMBER: _____
 (required to obtain a credit report and to obtain new address after move-out if not provided)

DATE OF BIRTH (month-day-year): _____

CITIZENSHIP: Canadian Citizen : _____ Landed Immigrant: _____ Other: _____

2. INFORMATION ABOUT WHO WILL LIVE WITH YOU (Co-applicant/Dependent):

NO ONE WILL LIVE WITH ME (check if this applies): _____

Co-applicant FULL NAME: _____
First Name Middle Name Last Name

Co-applicant ADDRESS: _____ POSTAL CODE: _____

Co-applicant PHONE: _____ (residence) _____ (other)

Co-applicant SOCIAL INSURANCE NUMBER: _____
 (To obtain credit report and to obtain new address after move-out if not provided)

Co-applicant DATE OF BIRTH (month-day-year): _____

Co-applicant CANADIAN CITIZEN : _____ LANDED IMMIGRANT: _____ OTHER: _____

RELATIONSHIP TO YOU (spouse, child, sibling, care worker etc.): _____

REQUESTING: _____ **1 Bedroom Apartment** _____ **2 Bedroom Apartment**
 _____ **2 Bedroom Townhouse** _____ **3 Bedroom Townhouse**

3. CURRENT ADDRESS – FOR RENTAL REFERENCE:

Address: _____ City/Prov: _____ Postal Code: _____

How long have you lived there? _____ How much rent did you pay? _____

Landlord's Name, Address and Telephone Number: _____

4. PREVIOUS ADDRESS – FOR RENTAL REFERENCE:

Address: _____ City/Prov: _____ Postal Code: _____

How long did you live there ? _____ How much rent did you pay? _____

Why did you leave ? _____

Landlord's Name, Address and Telephone Number: _____

5. SUBSIDY:

To be eligible to live in a Rent-Geared-To-Income project, we will be required to verify income.

Please submit a current "Certified Income Tax Report-Option C" for all income earners in the household. This is a special report that you must obtain from the Canada Revenue Agency (CRA). Have your current Notice of Assessment in front of you when you call the CRA as they will ask specific questions from this document to verify your identity. The **phone number to obtain your "Certified Income Tax Report – Option C" is 1-800-959-8281.**

6. HOUSEHOLD and 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 unit. 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</u>	<u>Source</u>	<u>Age(years)</u>	<u>Gender</u>
Person 1	_____					
Person 2	_____					
Person 3	_____					

Typical Sources of Income are:

Employment

Employment Insurance

Interest from Investments

Employment & Income Assistance

Pensions

Canada Student Loans

Self-Employment

Band Assistance

Insurance Settlement

7. PARKING:

Do you require parking? _____ (yes) _____ (no) How many spaces? _____

Vehicle Information (#1):

Make/Model: _____

Year: _____

License #: _____

Colour: _____

8. 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 Membership. If accepted, I/We undertake to create and maintain a safe, secure environment in the premises. I/We understand that this positive living environment will be 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 Friends Housing Inc. I/we will not have a principal place of residence elsewhere in Canada.

I/We declare that all the information in this application is correct and hereby authorize the Corporation and/or its Agent to verify any or all of the information contained herein. Please see our policy on Protection of Personal Documents and Information attached.

I/We understand that the apartments and townhouses of Friends Housing Inc. have a no-smoking policy within the buildings that I will abide by as covered in the rules and procedures.

SIGNATURE:

Date

Applicant Name (Print)

Applicant signature

Date

Co-Applicant Name (Print)

Co-Applicant signature

COLLECTION OF PERSONAL INFORMATION

The personal information collected will be used to determine your household's eligibility for tenancy, to administer tenant agreements and to prevent and detect fraud. Personal information collected will also be used to enable Friends Housing Inc. to provide ongoing service and to meet legal requirements.

CONSENT TO DISCLOSURE OF INFORMATION

I/We consent to the disclosure of any personal information that may be required for the purpose of determining or verifying my/our eligibility for tenancy. I/We authorize any person, agency, organization or financial institution to release and/or exchange information for that purpose. I/We understand this consent includes requests pertaining to my/our employment, income, liabilities and resources, family status as well as my/our standing with current and previous Landlords.

A photocopy of this signed Consent to Disclosure is sufficient to authorize the disclosure and/or exchange of information.

Name of Applicant
(Please Print)

Signature of Applicant

Date

Signature of Witness

Date

Name of 2nd Applicant
(Please Print)

Signature of 2nd Applicant

Date

Signature of Witness

Date

MURDOCH



MANAGEMENT

757 Henderson Highway, Winnipeg, Manitoba R2K 2K7
Tel 982-2000 Fax 669-4509

MURDOCH MANAGEMENT PRIVACY POLICY STATEMENT

OUR COMMITMENT

Our organization is committed to protecting the privacy of the personal information of its employees and clients. We value the trust of those we deal with and of the public, and recognize that maintaining this trust requires that we be transparent and accountable in how we treat the information that is shared with us.

During the course of our day to day business, we gather and use personal information. Anyone from whom we collect such information should expect that it will be carefully protected and that any use of this information is subject to consent. Our privacy policies and procedures are designed to achieve this.

DEFINING PERSONAL INFORMATION

Personal information is any information that can be used to identify a specific individual. This information can include an individual's beliefs or opinions, as well as facts about, or related to, the individual.

PRIVACY PRACTICES

Personal information gathered by our organization is kept in confidence. Our personnel are authorized to access personal information based only on their need to deal with the information for the reason(s) for which it was obtained. Safeguards are in place to ensure that the information is not disclosed or shared more widely than is necessary to achieve the purpose for which it was gathered.

WEBSITE AND ELECTRONIC INFORMATION

Murdoch Management has no confidential information or tenant information stored on any website. Electronic personal information is password protected.

UPDATING OF PRIVACY POLICY

We regularly review our privacy practices for our various activities and update our policy accordingly.

CONTACT INFORMATION

Questions or concerns relating to Murdoch Management's privacy policy regarding the treatment of personal information should be mailed to our office at 757 Henderson Highway, Winnipeg, Manitoba, R2K 2K7. Attention: Privacy Officer