

# Synala Housing Co-operative

3090 Kingsway, Vancouver, BC V5R 5J7  
Email: SY@spicemanagementgroup.com



Dear Applicant,

Thank you for your interest in Synala Housing Co-operative. The following provides some basic information about our Co-operative.

We have 40 units comprising of 1, 2, 3, 4 and 5 bedroom townhouses. Each member is entitled to the use of one (1) parking space in the underground parkade. A second parking stall may be assigned if available.

The maximum number of animals allowed in the Co-op is 5 cats and 5 dogs. If permitted, members are allowed one cat **or** one dog per unit. Assistance dogs are not counted in this. No dogs are permitted that exceed 20 inches when fully grown (as measured from ground to shoulder). Members may also have contained pets (fish or birds). All household animals are conditional to the Pet Policy.

A share purchase is required for membership in the amount of \$1,500.00. These funds are required **prior to move in**. This money is refundable in full, without interest, at the termination of your membership in the Co-operative, providing no outstanding monies are owed and there is no damage to your unit. Two (2) calendar months written notice is required for termination of membership.

Completed applications can be submitted by mail to the above address or by email SY@spicemanagementgroup.com.

Applications are kept on file for a period of twelve months. At the end of the twelve-month period, if you want your application to remain on file for a further twelve months, please notify the Co-operative in writing and indicate any relevant changes. Your name is placed on our waiting list when your application is received. If there is a vacancy, you will be informed at the interview.

Housing charge increases can be expected each year. Income minimum is based on the annual income for market. There are currently no subsidies available for this Co-op and the below criteria must be met for eligibility as a member of this community.

<b>Unit</b>	<b>Housing Charges</b>	<b>Income Minimum</b>	<b>Size (Sq Ft)</b>
1 Bedroom	\$1,037	\$31,110	752-775
2 Bedroom	\$1,305	\$39,150	993-1042
3 Bedroom	\$1,472	\$44,160	1133-1193
4 Bedroom	\$1,627	\$48,810	1546
5 Bedroom	\$1,739	\$52,170	1794

*Last modified: November 2017*

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## MEMBERSHIP APPLICATION FORM

*The information you provide on this application is confidential and will be used only to determine eligibility. Please fill out all applicable fields.*

### HOUSING REQUIREMENTS:

- 1 Bedroom     2 Bedrooms     3 Bedrooms  
 4 Bedrooms     5 Bedrooms

Special needs/preferences: \_\_\_\_\_

### PRINCIPAL APPLICANT:

Given Name(s)	Surname	Date of Birth (mm-dd-yy)	Gender

### CO-APPLICANT(S):

Given Name(s)	Surname	Date of Birth (mm-dd-yy)	Gender

### CHILDREN:

Given Name(s)	Surname	Date of Birth (mm-dd-yy)	Gender

**PETS:**

Name(s)	Breed	Spayed/Neutered? Yes/No

**CONTACT NUMBER(S):** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**CURRENT ADDRESS:**  
\_\_\_\_\_  
\_\_\_\_\_

**MONTHLY RENT:** \$ \_\_\_\_\_ **LENGTH OF STAY:** \_\_\_\_\_

Do you know someone who lives in Synala Housing Co-operative?  Yes  No

If yes, please indicate name and unit number: \_\_\_\_\_

Have you ever lived in a co-operative?  Yes  No If yes, when and where?

**REFERENCES:** *Please be advised, we do call all your references*

	Name of Reference	Address	Phone Number
Current Landlord			
Previous Landlord			
Previous Landlord			
Personal Reference			
Personal Reference			

**VOLUNTEER EXPERIENCE:**

Organization	Type of volunteer work	Dates

**VEHICLES:**

Note: If you are storing your vehicle in your assigned parking slot, a copy of the current storage insurance must be submitted to the co-op office and kept up to date.

Make/Model	Year	License Plate #

Please state how you heard of Synala and why you would like to join this Housing Co-operative.

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According to the Co-op Principles and the Agreements at joining Co-operative living, upon acceptance into membership you will be required to attend general meetings. You will also be expected to contribute to the success of the Co-operative by making decisions at general meetings, improving your community, paying your housing charges on time and being a great neighbour.

THE FOLLOWING PAGES WILL BE KEPT SEPARATE TO LIMIT ACCESS TO YOUR INFORMATION.

**CURRENT EMPLOYMENT INFORMATION:**

Applicant's Name: \_\_\_\_\_  
Present Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact Name : \_\_\_\_\_ Phone #: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Length of Employment: \_\_\_\_\_  
Yearly Income: \_\_\_\_\_ (prior to taxes)  
Any other yearly income: \_\_\_\_\_ (prior to taxes)  
List sources of other income: \_\_\_\_\_

Co-Applicant's Name: \_\_\_\_\_  
Present Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact Name : \_\_\_\_\_ Phone #: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Length of Employment: \_\_\_\_\_  
Yearly Income: \_\_\_\_\_ (prior to taxes)  
Any other yearly income: \_\_\_\_\_ (prior to taxes)  
List sources of other income: \_\_\_\_\_

NOTE: If any other person (19 years of age and older) will be living in your unit, please provide Personal History, Employment History and Volunteer Experience for each additional person in the above format set out within and attach to application

**TOTAL HOUSEHOLD GROSS INCOME:** \$ \_\_\_\_\_

*PLEASE BRING A COPY OF YOUR PREVIOUS YEAR'S INCOME TAX NOTICE OF ASSESSMENT AND DOCUMENTATION SUPPORTING YOUR INCOME IN A SEALED ENVELOPE AT THE TIME OF YOUR INTERVIEW.*

Are you able to purchase the shares for the required unit necessary for membership?

YES       NO

**ALL INFORMATION CONTAINED IN THIS APPLICATION WILL REMAIN CONFIDENTIAL.**

I/We hereby authorize Synala Housing Co-op to obtain, verify or confirm in whatever form they deem appropriate, such credit reports or information with regard to employment, income and references listed in this application. A credit check may be done on your behalf.

I/We attest that all information on this application is true and accurate.

A share purchase is required for all units in our Co-operative. You would be required to pay these funds by money order or certified cheque within 48 hours of being offered membership in the co-op. These funds are required upon acceptance into the Co-operative. This money is refundable in full (without interest) at the termination of your membership in the Co-operative providing there are no outstanding monies owing and there is no damage to your unit.

Two (2) calendar months' written notice is required for termination of membership.

All members and residents are required to abide by the co-ops rules, occupancy agreement and policies to ensure a viable and healthy community for all.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant Signature

\_\_\_\_\_  
Date

APPLICATIONS MUST BE COMPLETED IN FULL TO BE CONSIDERED FOR MEMBERSHIP AND WILL BE KEPT ON FILE FOR A PERIOD OF ONE YEAR FROM DATE OF RECEIPT.

IF YOU WISH TO REMAIN ON THE WAITLIST AFTER ONE YEAR, YOU WILL HAVE TO NOTIFY THE CO-OP IN WRITING.

WE DO NOT CONTACT ANY APPLICANTS UPON RECEIVING ANY APPLICATIONS. IT IS YOUR RESPONSIBILITY TO KEEP IN CONTACT WITH THE CO-OP.

***YOU CAN MAIL OR EMAIL BACK YOUR APPLICATION***

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