

Post 83 Co-operative Housing Association

APPLICATION INFORMATION PAGE

NO SUBSIDY IS AVAILABLE NOW OR IN THE FORESEEABLE FUTURE

Please fill in the blank areas of the attached pages that pertain to you. If the blank area does not pertain to you, write N/A. Please print clearly on all pages.

Please be advised that smoking is **Prohibited**.

Post 83 does **not** allow:

- Pets
- A single person to apply for a two-bedroom suite.
- More than two people in a one-bedroom suite (Post 83 Co-op follows Canadian National Occupancy Standards)
- Applicants with children occupy a suite below the third floor.
- A non-member to reside at Post 83 beyond two weeks unless approved by the Board of Directors
- Be the owner of some property (house, apartment, condo, etc.)

Annual income requirements:

- For a one bedroom (1BD) you must earn an annual combined household income of \$71,056 or more
- For a two-bedroom (2BD) you must earn an annual combined household income of \$72,200.00 or more

Return all the following to our office by mail (do not e-mail or Fax):

- Your completed application.
- A photocopy (NOT originals) of your most recent Notice of Assessment from the Canada Revenue Agency. This page states your income and the income tax that you have paid for the past tax year. You must also include a Notice of Assessment for each co-applicant. Please delete your Social Insurance Number. If you are unable to obtain a Notice of Assessment, then Post 83 will consider alternate, verifiable proof of income such as employment letters, pay stubs and bank statements. In your application form, please indicate the reason you are unable to produce a Notice of Assessment.
- Copies of pay stubs for the last 3 months for you and each co-applicant.
- \$20 Processing Fee to be given in the interview along with the credit check of \$30 totalling **\$50**.

Important: If you send your application without the requisite financial information for you and each co-applicant, Post 83 will not process your application.

It is Post 83's policy to remove from the waiting list all applicants who have been on it for six months. If you do not wish to lose your place on the waiting list, you should file another application (no extra fee) before your current one expires.

If you are invited to Post 83 for an interview following our review of your application, you and each co-applicant must bring the following:

- Two pieces of identification for you and each co-applicant. (One piece must contain a recent photograph. A driver's license or passport is best).
- Updated financial information (if different from what you have already provided).
- \$20 Admin Fee for processing the documents and \$30 for a credit check.

POST 83 CO-OPERATIVE HOUSING ASSOCIATION

APPLICATION FOR MEMBERSHIP

Number of persons under 18 years to live with the applicant _____? What are their ages? _____

The number of bedrooms wanted: _____ (1 or 2). Is a suite for wheelchairs wanted? ☐ Yes ☐ No

The number of parking stalls needed by the applicant and co-applicants: _____

Applicant's **full legal name** and all other names which the applicant uses. (PLEASE PRINT)

Surname: _____ First: _____

Applicant's Birth Date _____

Co-applicant's **full legal name** and all other names which the co-applicant uses.

Surname: _____ First: _____

Co-applicant's Birth Date _____

Applicant's area code and telephone number (ten digits) _____

Applicant's e-mail address _____

Applicant's address (including postal code) _____

Years of residence at the address above: _____

If this number is less than 5, please provide the applicant's previous address.:

If the applicant's most recent residence was rented, the rent per month was \$ _____ and the landlord's name and telephone number is:

The names of family, acquaintances and friends of the applicant who are living at Post 83:

The names of family, acquaintances and friends who are living at co-operative housing complexes other than Post 83:

If no family, acquaintances, or friends live in the complex, how did you hear of Post 83 Co-op? _____

Why do you want to live here or why do you want to live in a co-op? _____

Comment on your experience and/or knowledge of co-operative or group projects (this can include such things as housing co-ops, daycare, volunteer organizations, trade unions, food co-ops, etc.) _____

Comment on the expected value to you of living in a co-operatively owned housing association. _____

Mention any skills or experience that would make your membership a benefit to Post 83's committees and how you will participate in the operation of Post 83. _____

Estimate the number of hours you will contribute per month to the Post 83 Co-op. _____

Do you Volunteer at an organization? If so, please provide a reference letter. _____

The Obligations of Membership in Post 83 Co-op:

A member of Post 83 must:

- Buy a membership share (\$2,000 for a one-bedroom suite or \$2500 for a two-bedroom suite)
- Pay the monthly housing charge (Please provide a VOID cheque to set up automatic withdrawals) and other fees (i.e., parking fees)
- Must Volunteer and Participate in the operation of Post 83 Co-op.

Members must participate in the operation of Post 83 Co-op by serving on the Board of Directors, working on committees, being a committee lead, or doing odd jobs. Members who are actively engaged with the community receive a higher priority in our complimentary storage units.

Failure to meet obligations will result in the termination of the member's status in Post 83.

As a member of the Post 83 Co-op, your participation is required. Participation helps keep operating costs down, including housing charges, and lends itself to a greater sense of community.

The following is a list of committees and other positions available for your participation. Please rank them #1 through #3 with #1 being your most preferred.

- _____ **Finance Committee** – Responsible for reviewing monthly financial statements and assisting with the preparation of the yearly budget and ten-year plan. (Monthly meetings)
COMMITTEE NO LONGER EXISTS

- _____ **Membership Committee** – Responsible for reviewing incoming applications, interviewing prospective members, and arranging lease signings and in-suite inspections for all residents moving in and those residents moving out. (Monthly meetings/Based on need of vacant units/New members)

- _____ **Gardening Committee** – Responsible for the upkeep of the gardens and grounds including flower beds, plants, shrubs, and trees. (Monthly Meetings/Monthly tasks done in pairs)

- _____ **Odd Jobs** – Responsible for various jobs important to the day-to-day upkeep and operation of the Co-op, including seasonal property checks, door/elevator attendant, raking leaves, shovelling snow, delivering notices, setting up for meetings, painting garden benches, cleaning laundry room window screens, etc. (no meetings, interested members will be contacted by telephone)
COMMITTEE NO LONGER EXISTS

- _____ **Social Committee** – Responsible for organizing social events for members including teas, potluck dinners, bingo nights, and other social activities. (Monthly meetings)

- _____ **Recycling Committee** – Responsible for the upkeep of the recycling and food scrap bins, moving bins out weekly for pickup, and adhering to the rules and regulations of Burnaby Bylaws with respect to waste (Monthly Meetings/Monthly tasks done in pairs)).

- _____ **Fire/Safety** – Responsible for overseeing the fire and safety plan in conjunction with Post 83's Fire Chief, attends fire safety meetings once or twice a year to ensure all procedures are in place and that each floor has a designated Fire Warden and Assistant Warden.(Monthly Meetings/Monthly tasks done in pairs))
COMMITTEE BEING REVAMPED NOT AVAILABLE

Financial Information

Gross Annual Income

Applicant's Name: _____

Income: \$ _____

Co-applicant name: _____

Income: \$ _____

Other Adult(s) e.g., pension _____

\$ _____

TOTAL GROSS INCOME

\$ _____

Are you receiving Social Assistance? Yes, _____ If No _____
so, how much? \$ _____/per month

VERIFICATION OF INCOME

Applicant:

Employer's Name: _____

Address: _____

Your Position: _____

The number of years employed there: _____

Co-applicant:

Employer's Name _____

Address: _____

Your Position: _____

The number of years employed there: _____

I give the information above to obtain membership in Post 83 Co-op. I warrant that the information is true. I give my consent to Post 83 and to its agents to secure such credit reports and other information about me as Post 83 Co-op deems necessary to evaluate this application.

Applicant's Signature: _____

First Co-Applicant's Signature: _____

Second Co- applicant's Signature: _____

Dated this _____ day of _____, 20 _____

PERSONAL INFORMATION PRIVACY CONSENT

POST 83 CO-OPERATIVE HOUSING ASSOCIATION (the “Co-op”)

#106 - 4221 Mayberry Street
Burnaby, BC V5H 4E8

For every resident 19 years or more in age the Co-op is required to obtain their written consent allowing the Co-op to collect and share personal information.

I/We agree that the Co-op may collect, use, and share information about me/us for the following purposes only: determining eligibility for membership and/or residency in the Co-op; determining eligibility to receive income tested subsidy or other benefits that the Co-op administers on its own or another organization’s behalf; and to ensure sound management of the Co-op. I/We understand that information provided to the Co-op will be destroyed when it is no longer needed for the purposes stated above.

I have read and received a copy of this statement.

Name	Signature	Date