



## NANEGKAM HOUSING CORPORATION HOUSING APPLICATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Currently a member of the Native Council of PEI: YES or NO

If no please provide:

Native Ancestry: \_\_\_\_\_ Non-Native with Native child: \_\_\_\_\_

**\*\*MUST PROVIDE PROOF OF ANCESTRY WHEN SUBMITTING APPLICATION\*\***  
(i.e. status card, genealogical letter)

**Previous Landlord:**

Name	Address	Telephone
1.		
2.		

**Please list ALL other people that will be living with you full time and part-time:**

Name	Date of Birth	Relationship to Applicant	Male/Female	If children do they live with you full or part time

**\*\*MUST PROVIDE CUSTODY AGREEMENTS OR ANY OTHER LEGAL DOCUMENTATION FOR CUSTODY AND VISITATION RIGHTS\*\***

**How much notice must you give before moving?**

One Month     Two Months     Other

**Looking for:**

One bedroom     Two bedrooms     Three bedrooms     Other

**Work History:**

Occupation	Name of Employer	Employer Phone	Employment Duration

**Is your employment:**     Seasonal     Part-time     Full-time     Other

**ALL Financial Information of Household Occupants:**

	Applicant	Co-Applicant	Other Occupants
Gross monthly income before deductions			
Disability Pension			
Other Pensions			
Social Assistance			
Spousal and/or Child Support			
Employment Insurance (EI) Benefits			
Other			
<b>Total</b>			

**\*\*YOU WILL BE REQUIRED TO PROVIDE INCOME VERIFICATION FOR ALL HOUSEHOLD MEMBERS (PRINTOUT FROM REVENUE CANADA, PAY STUBS, ETC) IF YOU ARE CHOSEN AS CANDIDATE FOR A UNIT\*\***

**Present Living Conditions:**

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**Anything you would like the Board to consider when reviewing your application:**

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**Is Baby expected?**    No    Yes   If yes, when? \_\_\_\_\_

My rent is presently \$ \_\_\_\_\_ per month.

Is heat extra? \_\_\_\_\_      If so, how much per month? \$ \_\_\_\_\_

Is hydro extra? \_\_\_\_\_      If so, how much per month? \$ \_\_\_\_\_

Is water extra? \_\_\_\_\_      If so, how much per month? \$ \_\_\_\_\_

**Any Arrears? If so how much?** \_\_\_\_\_

Do you have any health problems that are making you move? (If yes, please attach a doctor's letter with your application)

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Have you ever applied to a non-profit housing society before?    Yes    No

If yes, where? \_\_\_\_\_ When? \_\_\_\_\_ Dates: \_\_\_\_\_

Do you own a pet?    Yes    No

What kind, how many? \_\_\_\_\_

Do you own a vehicle?    Yes    No

**Declaration (Please READ carefully)**

I/We declare that the information contained on this form is true and correct and I/We hereby authorize Nanegkam Housing Corporation to use this application, to make such enquiries about my credit status as they see fit in order to process the application. **I understand that my application may not be approved if I am selected for an apartment/duplex/townhouse and have any pets as they are not permitted in multi-unit buildings. Failure to comply can lead to termination of your lease.** If I am selected for tenancy, I pledge to uphold the society's policies and be held responsible in keeping the property in good livable condition and I/We will be held responsible for any damage done to the property. I understand that I will sign a lease before I move into a unit. I understand that I will supply income verification for each member of the household who receives an income (printout of income from Revenue Canada, letter from employer, pay/EI stubs, etc.). I/We will also provide proof that I/We have custody of our child/children or a support letter to show their arrangement (full time or part time or weekends). I understand that I must pay a security deposit of \$500.00 to Nanegkam Housing Corporation before I move into a unit. There is an option for a payment plan for the damage deposit of \$200.00 upon move in and an additional \$100.00 each month for the following three months.

**PLEASE BE ADVISED THAT THIS APPLICATION MUST BE RENEWED EVERY SIX MONTHS FROM DATE RECEIVED TO BE CONSIDERED BY TENANT SELECTION COMMITTEE**

**ALL SECTIONS OF THE APPLICATION MUST BE FILLED OUT INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Co-applicant: \_\_\_\_\_ Date: \_\_\_\_\_

(Note: If space is not adequate for your response, please attach a piece of paper to your application)

**OFFICE USE ONLY**

DATE RECEIVED: \_\_\_\_\_

RECEIVED BY:     MAIL     FAX     IN OFFICE     OTHER

PROOF OF ANCESTRY:     YES     NO

PROOF OF CUSTODY:     YES     NO

IS APPLICANT A MEMBER OF THE NATIVE COUNCIL OF PEI?    YES  NO

Please submit your application using one of the following methods:

Email: [rgi@ncpei.com](mailto:rgi@ncpei.com)

Mail: Native Council of PEI, 6 FJ McAulay Court, Charlottetown, PE C1A 9M7