



*It is important to ensure that all sections of your application are completed by you and returned to the office including all documentation required.*

Applicant selection is based on the date received. The wait time will depend generally on three factors:

- (1) the receipt of your information,
- (2) the availability of units in the areas of choice and
- (3) the number of applications ahead of yours on the waiting list. When your application reaches the top of the waitlist, an interview will be arranged, at which time a landlord reference check will be completed. **If we are unable to contact you, your application will be cancelled.**

Rents are established on an individual basis using a percentage of the total household income received from all sources.

**All** applications must be accompanied by verification of your monthly income in the form of a cheque stub, bank book or statement, letter from your employer as well as a copy of any maintenance order for child support etc. We also require a copy of your most recent Income Tax Summary page or Notice of Assessment.

**FAMILY UNIT APPLICANTS ONLY:** You are required to complete and forward the attached Nova Scotia Power Confirmation sheet to the fax number indicated to confirm your ability to get power in your own name prior to being approved for a housing waitlist.

**Note:** if there is more than one, **both** leaseholders must **complete** and **sign** the NSPC form.

• The majority of **family** units consist of three bedrooms, living room, kitchen and bath. They contain a fridge, stove and hookup for a washer and dryer.

• The majority of **senior** units consist of one bedroom, living room and kitchenette, bath and storage room. They contain a fridge and stove and there are laundry facilities in every complex.

Thank you for applying. Should you have any additional questions, do not hesitate to call our office between the hours of 8:30 am and 4:30 pm, Monday through Friday.

# Nova Scotia Coordinated Access Housing Application

## Section 1 - Applicant

### Primary Details

Salutation     Mr.         Mrs.         Ms.         Miss

Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Maiden Name \_\_\_\_\_

Marital Status     Single     Divorced     Common Law     Married     Widowed     Other

Date of Birth (MM/DD/YYYY) \_\_\_\_\_ Sex     Male     Female

Social Insurance Number (SIN) \_\_\_\_\_

Student                     Yes     No    Name of School \_\_\_\_\_

Status in Canada         Canadian Citizen     Landed Immigrant

Other    Specify if Other \_\_\_\_\_

### Priority Access

(This pertains to all household members listed on the application)

I/We are victim(s) of family abuse. *If you checked any of the checkboxes, please specify details:*

I/We are required to live in a location close to life sustaining health services

I/We currently occupy inadequate housing which poses an immediate health and/or safety risk \_\_\_\_\_

### Current Address

Street No. and Name \_\_\_\_\_ Apt. No. \_\_\_\_\_

City \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

### Mailing Address (if different than current address)

Street No. and Name \_\_\_\_\_ Apt. No. \_\_\_\_\_

City \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

### Telephone Numbers

Home \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Work \_\_\_\_\_ Can we safely contact you at your mailing address and home phone number?     Yes     No

Cellular \_\_\_\_\_ If No, where can we contact you? \_\_\_\_\_

### Present Accommodation

Home Information                     Own     Rent     Temporary     Homeless     Shelter     Boarder

Monthly Housing Expenses: Please include monthly mortgage payment or monthly rent and average monthly electricity, water, heating fuel and taxes, as applicable.                    \$ \_\_\_\_\_

### Current Landlord Information

(Please leave this section blank if you reside in you own home or are homeless)

Landlord Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Length of Tenancy (Months) \_\_\_\_\_

Have you received an eviction notice ?     Yes     No    Eviction Date \_\_\_\_\_

Eviction Reason \_\_\_\_\_

### Persons to contact in your absence

Name	Relationship	Telephone Number

# Nova Scotia Coordinated Access Housing Application

## Section 2 - Co-Applicants / Other Members

Leaseholder  Yes  No Relationship to Applicant \_\_\_\_\_

Salutation  Mr.  Mrs.  Ms.  Miss

Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Marital Status  Single  Divorced  Common Law  Married  Widowed  Other

Date of Birth (MM/DD/YYYY) \_\_\_\_\_ Sex  Male  Female

Social Insurance Number (SIN) \_\_\_\_\_

Student  Yes  No Name of School \_\_\_\_\_

Status in Canada  Canadian Citizen  Landed Immigrant  
 Other Specify if Other \_\_\_\_\_

Leaseholder  Yes  No Relationship to Applicant \_\_\_\_\_

Salutation  Mr.  Mrs.  Ms.  Miss

Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Marital Status  Single  Divorced  Common Law  Married  Widowed  Other

Date of Birth (MM/DD/YYYY) \_\_\_\_\_ Sex  Male  Female

Social Insurance Number (SIN) \_\_\_\_\_

Student  Yes  No Name of School \_\_\_\_\_

Status in Canada  Canadian Citizen  Landed Immigrant  
 Other Specify if Other \_\_\_\_\_

Leaseholder  Yes  No Relationship to Applicant \_\_\_\_\_

Salutation  Mr.  Mrs.  Ms.  Miss

Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Marital Status  Single  Divorced  Common Law  Married  Widowed  Other

Date of Birth (MM/DD/YYYY) \_\_\_\_\_ Sex  Male  Female

Social Insurance Number (SIN) \_\_\_\_\_

Student  Yes  No Name of School \_\_\_\_\_

Status in Canada  Canadian Citizen  Landed Immigrant  
 Other Specify if Other \_\_\_\_\_

Leaseholder  Yes  No Relationship to Applicant \_\_\_\_\_

Salutation  Mr.  Mrs.  Ms.  Miss

Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Marital Status  Single  Divorced  Common Law  Married  Widowed  Other

Date of Birth (MM/DD/YYYY) \_\_\_\_\_ Sex  Male  Female

Social Insurance Number (SIN) \_\_\_\_\_

Student  Yes  No Name of School \_\_\_\_\_

Status in Canada  Canadian Citizen  Landed Immigrant  
 Other Specify if Other \_\_\_\_\_

# Nova Scotia Coordinated Access Housing Application

## Section 3 - Previous Tenancy

Please specify previous 3 tenancies or previous tenancies up to 3 years for Applicant and Co-Applicant(s), whichever is longer:

Have you ever been a tenant in:

Public Housing	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Rent Supplement	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Non-Profit	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Other	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Cooperatives	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	If Other, specify _____				

Applicant/Co-Applicant _____ Address Line 1 _____ Address Line 2 _____ City _____ Province, Postal Code _____ Country _____	Occupancy From (MM/YY) _____ Occupancy To (MM/YY) _____ Landlord Name _____ Landlord Phone No. _____
Applicant/Co-Applicant _____ Address Line 1 _____ Address Line 2 _____ City _____ Province, Postal Code _____ Country _____	Occupancy From (MM/YY) _____ Occupancy To (MM/YY) _____ Landlord Name _____ Landlord Phone No. _____
Applicant/Co-Applicant _____ Address Line 1 _____ Address Line 2 _____ City _____ Province, Postal Code _____ Country _____	Occupancy From (MM/YY) _____ Occupancy To (MM/YY) _____ Landlord Name _____ Landlord Phone No. _____
Applicant/Co-Applicant _____ Address Line 1 _____ Address Line 2 _____ City _____ Province, Postal Code _____ Country _____	Occupancy From (MM/YY) _____ Occupancy To (MM/YY) _____ Landlord Name _____ Landlord Phone No. _____
Applicant/Co-Applicant _____ Address Line 1 _____ Address Line 2 _____ City _____ Province, Postal Code _____ Country _____	Occupancy From (MM/YY) _____ Occupancy To (MM/YY) _____ Landlord Name _____ Landlord Phone No. _____

## Nova Scotia Coordinated Access Housing Application

**Section 4 - Income** Statement of all MONTHLY income BEFORE deductions received by all persons/family members to live in the accommodation

<b>Applicant Last Name</b> ---->				
<b>Applicant First Name</b> ---->				
<b>Income Categories</b>	<b>\$ Amount</b>	<b>\$ Amount</b>	<b>\$ Amount</b>	<b>\$ Amount</b>
Alimony/Child Support				
Capital Gains				
Canada Pension Plan Disability				
Canada Pension Plan Other				
Dividends				
Employment Insurance				
Employment Income				
Foster Child Payments				
Gratuities				
Immigrant Sponsorship				
Human Resource Development Canada				
Interest				
Old Age Security/Guar. Income Supp./Spouse Allow.				
Other Country Social Security				
Other Income				
Other Pension				
Rental Income				
RRSP/RIF				
Social Assistance				
Student Loan				
Workers Compensation				
Veteran Pensions & Allowance				
<b>Total Income for member: \$</b>				

**Total Income for the household per month: \$** \_\_\_\_\_



## Nova Scotia Coordinated Access Housing Application

**Declaration and Consent: Please read and sign this statement:**

I/We declare that the information provided in the application form is correct and complete.

I/We understand that falsification of any or all information provided by me/us may be cause for the cancellation of the application.

I/We understand that it is my/our responsibility to advise the Housing Authority of any changes to the information given in this application and to provide any supporting materials required for my/our application.

I/We authorize the Housing Authority or its representatives to make inquiries that are necessary to verify the information submitted in this application.

I/We authorize the Housing Authority to receive and exchange information with my/our current and previous landlord(s).

Applicant's Signature

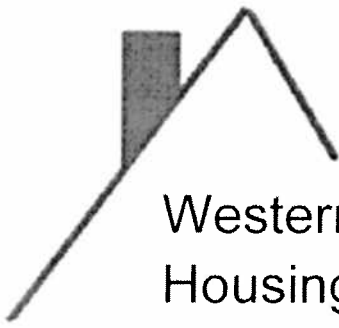
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Co-Applicant's Signature

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Application Date

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## Western Regional Housing Authority

### **PET POLICY**

Permission to keep a pet may be granted, subject to the "Pet Policy Rules and Regulations", to tenants who reside in a house or apartment that has direct access to the outside. Residents in other locations may be permitted to keep a pet by reason of Special Need (ie. Seeing Eye dog).

All requests to have a pet must be in writing on the prescribed "Application for Permission to Keep a Pet Animal". You will be notified in writing if your application is approved. This permission is subject to the "Pet Policy Rules and Regulations" and may be withdrawn for failure to comply with any of these rules. The Authority may also, at its sole discretion, withdraw permission to meet changing conditions.

#### **RULES AND REGULATIONS:**

A pet for the purpose of eligibility refers to "common household pets" such as a dog, cat or rabbit, which are usually kept for pleasure. Each household will only be permitted to have one pet (such as one cat or one dog) at a time.

#### **RESTRICTIONS:**

Reptiles, farm animals or animals that would be dangerous or frightening to other tenants will not be permitted. No Pit Bulls, Rottweilers, Dobermans, German Shepherds, Mastiffs or cross breeds there of, will be permitted. Pets must not be kept for breeding purposes.

#### **EXCEPTIONS:**

Permission will be given to those residents who require a special needs dog. A letter confirming official training for purpose of special needs will be required in these instances.

#### **LICENSING:**

The Pet shall be licensed according to applicable local bilaws. Owners may be required to provide evidence of this license.



**INOCULATIONS:**

All pets shall be inoculated in accordance with provincial and municipal laws. Pet owners shall be required to provide proof of this when requested.

**SANITARY STANDARDS:**

It is the responsibility of the tenant to ensure that waste is cleaned up from the property on a regular basis. If a litter box is used, it must be cleaned regularly to prevent odors.

**RESTRAINT:**

A pet shall be properly restrained and controlled while in any common or public area at the project. A pet shall not be allowed to run at large. If repeated incidents of allowing a pet to roam or make unnecessary noise are noted, the owner may be advised that the animal must be removed from the project.

**REGISTRATION WITH THE AUTHORITY:**

A tenant must make application to the Authority for permission to keep a pet. A pet shall be registered with the Authority before it is brought to the project. The following information will be required:

- A. Proof of inoculation and licensing.
- B. Description (size, type, etc.).
- C. The name, address and telephone number of someone who will look after the pet in the tenant's absence.

**EMERGENCY SITUATIONS:**

If a pet is vicious, displays symptoms of severe illness or demonstrates other behavior that constitutes an immediate threat to the health or safety of the tenants in general, the Authority shall have the pet removed from the property by whatever process it deems necessary. The Housing Authority reserves the right to charge the tenant for any damage done by the pet.

## Section 6 - Building Selections

unless otherwise stated, units are 1 bedroom

MUNICIPALITY	AREA	NOTES	V	BUILDING COMPLEX
Municipality of the County of Kings	Canning	Smoking		Glooscap Seniors
	Centreville	Smoking 1&2 bedrooms		Centreville Place
	Hants Border	Smoking		J.B. North Manor
		Smoking		Edgewood Hall Section A & B
		No Smoking		Edgewood Hall Section C & D
		Pet Friendly Smoking		Highland View Manor
		No Smoking		
		Pet Friendly 2 Bedroom		Casteloma Drive
		No Smoking		
		Pet Friendly 2 Bedroom		Colonial Drive
Town of Kentville		1&2 bedrooms Cats only		Asset Management
	Port Williams	No Smoking		Orchard View Manor - Top 2 Floors
		Pet Friendly No smoking		Orchard View Manor - Bottom Floor
		Pet Friendly Smoking		Hilltop Manor - Bottom Floor
		No Smoking		Hilltop Manor - Top Floor
		No Smoking		Northend Pines

## Section 6 - Building Selections

unless otherwise stated, units are 1 bedroom

MUNICIPALITY	AREA	NOTES	V	BUILDING COMPLEX
Town of Kentville	Kentville	Pet Friendly Smoking		Terrace Cottages
		No Smoking Cats only		Cornwallis Developments
Town of Wolfville	Wolfville	Pet Friendly Smoking		Blomidon View
		No Smoking 1&2 bedrooms		Woodland Apartments
		No Smoking Pet Friendly 2 Bedroom		Iona Drive
		1&2 Bedrooms		Tideways
Municipality of East Hants	Mount Uniacke	Smoking		Park View Manor
	Falmouth	Smoking		Meadowland Place
Municipality of West Hants	Windsor	Smoking		Kendall Court
		Smoking		Kendall Manor
		No Smoking		Kendall Terrace
		No Smoking		Kendall Villa
Town of Windsor	Windsor	Smoking		70 Tremain Crescent
		No Smoking		72 Tremain Crescent
Town of Hantsport	Hantsport	No Smoking		Windsor Heights
		No Smoking 1&2 Bedrooms Smoking		Jubilee Court Jubilee Lodge