



#100, 3502 27<sup>th</sup> Avenue  
 Vernon, BC V1T 7A1  
 250.545.6475  
 creeksidevillage@communitylandtrust.ca

## Creekside Village

Application for Seniors 55+ or 50 on Permanent Disability.  
 No Pets. No Smoking. Single Occupancy.  
***\*\*Applications are kept on file for one year. Please ensure you contact us on a regular basis if you are actively looking for housing. If you decline an available suite, your application will be removed from the list, and you will need to reapply and re-enter the waitlist.\*\****

Please check your preference:                       Studio Apt   or    One bedroom  
 Suite location preference: (No elevator)    Ground floor    2nd floor    Any level

Full Name:		
SIN: (Optional)	DL or BCID:	Date of Birth:
Home Ph:	Cell Ph:	
Email Address:		
Present Address:		
How Long:		
Why are you moving:		
Prior Address:		
How Long at Prior Address:		
Emergency Contact:	Phone:	
Relationship:		
Doctor:	Phone:	
Why do you want to live here?		
How did you hear about us?		

**References: Two are required. NO Relatives, Co-workers, Volunteer contacts**

Full Name:			
Phone Number:		Relationship:	
Full Name:			
Phone Number:		Relationship:	



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**Landlord References: Applications are considered incomplete and will not be considered further until all information is provided.**

Full Name:	
Phone Number:	
Full Name:	
Phone Number:	

**Please complete the following questions to assist in determining eligibility.  
 You will also be required to provide financial records to support your application.**

Are you eligible for Low-Income Housing?	
Monthly Income? (Please circle the source(s) - CPP/OAS/GIS/Other?)	Total:
Do you need to give one-month notice to your present Landlord?	
Do you have/own a Vehicle? (Parking on site is limited and waitlisted.)	
Do you have a Scooter / Wheelchair?	
Are you able to live Independently?	
Are you able to manage using the Stairs?	
Are there any health issues that we should be aware of?	
If Yes, please explain:	
Are you interested in helping the Volunteers with the Gardens? <i>(Optional)</i>	
Do you agree to abide by the rules and regulations of this society?	
If asked, would you agree to a Criminal Record Check?	
Do you smoke? There is absolutely NO smoking in the Premise/Property.	
Do you understand that there are NO pets allowed in this building?	
Do you have family or friends who can assist you?	



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I understand that this application does not constitute any agreement on the part of the Vernon & District Community Land Trust Society to provide rental accommodation. I affirm that the given information in this application is true.

I understand that it is my responsibility to advise the Society of any charges to the information provided.

I give my consent to the Vernon and District Community Land Trust Society to obtain information pertaining to this application, to do due diligence for safety, security and well-being of the Society and the residents of the Creekside Village.

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

**THE ABOVE STATED PROPERTY IS FULLY CERTIFIED IN THE VERNON CRIME FREE MULTI-HOUSING PROGRAM. AS SUCH THE STANDARDS OF THAT PROGRAM MUST BE ADHERED TO.**

**All information collected is in accordance with Privacy Act 07/2012.**

**This area for Office Use Only.**

Identification:	Drivers' License / BC ID / Passport / Other:
Payroll: <i>Employer/Last Three Statements:</i>	
Bank Statements (3 consecutive) of all Active Accounts	
Income Tax (including Notice of Assessment)	
Personal Reference Check:	
Landlord Reference Check:	
Notes:	