



WESTMINSTER HOUSING SOCIETY INC.

c/o 425 Elgin Avenue • Winnipeg MB • R3A 1P2

Recipient of National Award from Canada Mortgage and Housing Corporation for Innovation in Housing

According to the application received by S.A.M. (Management) Inc. you have checked off the Westminster Housing Society as a housing project you are interested in. You may not realize exactly what being part of Westminster Housing Society entails and therefore we would like to take this opportunity to tell you about some of the benefits.

Westminster Housing Society was incorporated in September of 1993. The object of the corporation is to provide good quality housing to low income tenants at rental rates they can afford and at the same time to rehabilitate older housing stock, primarily in the West Broadway area.

Westminster Housing Society has a Tenant Relations Committee which meets monthly to review concerns and suggestions of the tenants. This committee has designed an application form specific to the Westminster Housing Portfolio.

S.A.M. (Management) Inc. would like to confirm that you are interested in being part of the Westminster Housing community and ask that you fill out the attached application form to confirm your interest.

Applicants with minimal or no rental history may be required to meet with members of the Tenant Relations Committee.

Should you have any questions or concerns, please contact S.A.M. (Management) Inc. at 942-0991 or email admin@sam.mb.ca.

A CHARITABLE ORGANIZATION
PROVIDING ECONOMICAL QUALITY HOUSING

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APPLICATION FOR TENANCY ALL INFORMATION IS STRICTLY CONFIDENTIAL

I/We _____ and _____

in the City of Winnipeg of the Province of Manitoba, hereby make application for housing accommodation in Westminster Housing Society Inc.

1. HOUSEHOLD INFORMATION

Applicant Name(s): _____

Address: _____ City: _____ Postal Code: _____

Home Phone: _____ Work Phone: _____ Alternate Phone: _____

Please list all household members that will be residing in the Westminster Housing unit, including applicant, dependents and any other household members.

NAME	RELATIONSHIP	BIRTH DATE (yy/mm/dd)	S.I.N. #

2. HOUSING INFORMATION

Present Landlord/Rental Agency: _____

Contact Name: _____ Phone: _____

How long have you lived at your current address: _____

How much do you pay each month for: Mortgage/Rent: _____ \$

Utilities (heat, light, water, etc.): _____ \$

3. EMPLOYMENT AND FINANCIAL INFORMATION

SOURCE OF INCOME:

- | | | |
|---|---|---|
| <input type="checkbox"/> Employment | <input type="checkbox"/> Employment and Income Assistance | <input type="checkbox"/> Employment Insurance |
| <input type="checkbox"/> Student Assistance | <input type="checkbox"/> Worker's Compensation | <input type="checkbox"/> Maintenance Payments |
| <input type="checkbox"/> Pension | <input type="checkbox"/> Other: _____ | |

IF EMPLOYED:

Occupation: _____ Current Employer: _____

Address: _____ Phone: _____

Length of employment: _____

Please report the total gross income (before deductions) for all household members.

NAME	MONTHLY INCOME	SOURCE
TOTAL HOUSEHOLD MONTHLY INCOME	\$	

Please attach a certified copy of your tax return (most recent) and pay stubs or benefit statement indicating your current monthly income.

Current Bank/Credit Union: _____ Branch: _____

4. COMMUNITY INVOLVEMENT

Are you involved in any volunteer activities in the community? Please describe. _____

DECLARATIONS

I/We declare the above information contained herein to be true and correct and hereby authorize S.A.M. (Management) Inc.'s employees and agents to conduct such personal investigations as may be required to process this application, verify my/our continuing eligibility, and recover any indebtedness arising hereunder.

- To satisfy legal or regulatory requirements.

I/We acknowledge that S.A.M. (Management) Inc. may divulge information from my tenancy file in accordance with the provisions of the Personal Information Protection of Electronic Documents Act (PIPEDA). In the event that I have any special requirements for confidentiality of such information, I will so advise S.A.M. (Management) Inc. in writing.

I/We hereby consent to the collection, use, retention and disclosure of the personal information provided to S.A.M. (Management) Inc. in this application for the following purposes:

- To carry out its normal business operations, including eligibility for housing. Where another business performs a service for S.A.M. (Management) Inc., normal business operations would include disclosure by S.A.M. (Management) Inc. to that other business of that portion of my personal information that it requires in order to perform that service.

I/We am/are authorized to disclose to S.A.M. (Management) Inc. all personal information relating to other individual(s) disclosed herein and to consent on behalf of such individual(s) to the collection, use, disclosure and retention of personal information relating to such individual(s) as provided herein.

Signature

Date

Signature

Date