METRO VANCOUVER HOUSING CORPORATION
TENANCY APPLICATION FORM

If you have any questions about completing this form, please visit us at 4730 Kingsway, Burnaby BC or contact Metro Vancouver Housing by email at housing.inquiries@metrovancouver.org or by telephone at 604-432-6300.

1. Applicant Information

Last name _____ First Name _____

Street address _____ Apartment Number _____

City _____ Province _____ Postal Code _____

Home Phone Number _____ Work Phone Number _____ Cell Phone Number _____

E-mail Address _____

2. Household Information

- List all household members, including you. If necessary, attach a separate sheet of paper to add more names.

Last Name	First Name	Relationship to Applicant	Birth Date (mm/dd/yyyy)	Age	Gender
		Applicant (You)			

- Do all of the people listed above live with you full time right now? ☐ Yes ☐ No

If no, please provide the name of the person(s) and the number of days per week they live with you:

Name	Days per week	Shared custody?	If not shared custody, why does the person not live with you full-time?
		Yes / No	
		Yes / No	

- Are you or any other occupant party to a child custody agreement or subject to a custody order?
  If yes, please attach a copy with your application. ☐ Yes ☐ No

- Do you expect the number of people living with you to change in the next 12 months? (For example, because of pregnancy, family joining, family leaving, child in care) ☐ Yes ☐ No
  If yes, please explain:
  _____

3. Income Information

Tenants, applicants and other occupants must provide proof of income. **Please attach the following**:

- **Notice of Assessment for current year** from Canada Customs and Revenue Agency (CCRA) for all occupants 19 years and older (if you do not have this document, contact CCRA at **1-800-959-8281** to request it) ☐ Attached

- **If employed**, copies of three current consecutive pay stubs which show your gross income and deductions. Please provide employment reference: ☐ Attached ☐ Not applicable

  _____ _____ _____ _____
  Start date with current employer | Company Name | Contact Name | Phone Number

- **If self-employed**, copy of Statement of Business Activities and Income Tax Return ☐ Attached ☐ Not applicable

- **If other income** (example: EI, pensions, Ministry benefits), please explain: _____
  _____

- **Income Summary**

Name	Income Source (job, EI, pension, etc.)	Gross Monthly Income
		$
		$
		$
		$
	Total	

4. Health and Mobility Information

- Do you or any members of your household have problems with stairs?
  ☐ No problem with stairs ☐ Cannot deal with stairs ☐ Can only deal with (#) stairs

- Do you or any members of your household use one of the following?
  Wheelchair ☐ Yes ☐ No Scooter ☐ Yes ☐ No
  If yes, who uses the wheelchair or scooter? _____Do they use it in the home? ☐ Yes ☐ No

- Do you or any members of your household have any other health conditions or disabilities? ☐ Yes ☐ No
  If yes, please explain:

Name	Explain the health condition or disability and how it affects your housing needs. Describe any special requirements needed due to mobility or health conditions.

NOTE: MVHC may require you to provide additional documentation, such as a doctor's note, about the health condition or disability and how it affects your housing needs.

5. Other Housing Preferences

- **Smoking:** Please note that many Metro Vancouver Housing sites are transitioning to smoke-free status - You may be asked to sign a No-Smoking Tenancy Agreement Amendment
  ☐ I understand that I may be asked to sign a No-Smoking Agreement

- **Preferred unit size*** ☐ 1bd ☐ 2bd ☐ 3bd ☐ 4bd

  ***Note:** MVHC follows the national occupancy standards for unit size. In some circumstances, other preferences can be accommodated.

- **Do you have any pets?** ☐ Yes ☐ No

  If yes, please provide the following information:

Type of Pet	Primary Breed	Secondary Breed	License or ID Number	Sex	Age	Approximate Adult Weight

- **Preferred Location/Building**

  Before completing, please consider which sites offer the community and unit type you are looking for.

1.	2.	3.

6. Housing History

- Have you previously been a tenant of MVHC (formerly the Greater Vancouver Housing Corporation or "GVHC")?
  ☐ Yes ☐ No

  If yes, please detail _____ _____ _____
  Date Occupied Building Name Address/Municipality

- Please provide information on your last three landlords:

Rental Address	From MM/DD/YY	To MM/DD/YY	Name of Landlord	Landlord's Phone #	Reason for Leaving

- Have any adults (19 and older) listed on this application lived with you for less than two years? ☐ Yes ☐ No

  If yes, please list their name and landlord information for their last three landlords:

  Name(s) _____ _____

Rental Address	From MM/DD/YY	To MM/DD/YY	Name of Landlord	Landlord's Phone #	Reason for Leaving

7. Declaration and Agreement

The Applicant and all adult household members (anyone age 19 and older) must agree to the following:

I declare that:

- This is my application and/or verification form; and
- All the information in it is correct and complete to the best of my knowledge.

In accordance with the *Freedom of Information and Protection of Privacy Act* ("FOIPPA") and/or *Privacy Act*, I authorize:

- MVHC to make enquiries to verify the information given in this form;
- MVHC to receive and exchange credit and other information about me with credit bureaus to help assess my qualification for housing and/or rental assistance;
- MVHC to conduct reference checks, criminal record check and/or court check and search of websites in the public domain;
- any person, corporation, social or government agency, including but not limited to ICBC, Human Resources Development Canada, Veteran's Affairs Canada, the Canada Pension Plan and the British Columbia Ministry responsible for income assistance, to release my financial and medical information to MVHC including, but not limited to information from my CPP disability pension, Persons with Persistent Multiple Barriers or Person with Disabilities applications, if applicable, and to discuss that information with MVHC staff so that MVHC may assess my qualification for housing and/or rent assistance;
- Canada Revenue Agency ("CRA") to verify, release and discuss my income, assets and other taxation information with MVHC staff so that MVHC may assess my qualification for housing and/or rent assistance; and
- as per section [33.1(1)(i)] of FOIPPA, MVHC to exchange personal information about me or adult members of the household with a collection agency for the purposes of collection of outstanding amounts related to my tenancy.

I understand and agree that:

- It is my responsibility to tell MVHC in writing about any changes to the information given in this form and to provide MVHC with supporting materials as may be requested;
- I must qualify for MVHC residential housing by way of income, occupancy (as determined by National Housing Standards), age (for designated seniors' units) and/or disability (for designated units); and
- Should circumstances change during my tenancy such that I cease to qualify for housing with MVHC, then MVHC may terminate my tenancy with 2-months written notice.
- Metro Vancouver Housing Corporation ("MVHC") is a public housing body as defined in the Residential Tenancy Act. MVHC's rental units are subsidized rental units as defined in the Act and proposed tenants and other occupants are required to demonstrate that they meet eligibility criteria related to income, number of occupants, health or other similar criteria before MVHC will enter into a tenancy agreement.
- Tenants are required to provide MVHC with an income verification statement, once a year on MVHC's request and/or immediately when there is a change in the annual income of the tenant or any occupants who are age 19 or older and/or when there is a change in household composition.
- Processing times for applications will vary and **MVHC will not process incomplete applications**. Tenants and other occupants who fail to provide required information to MVHC or who provide false or misleading income and occupancy verification information are ineligible for housing and/or rent assistance. MVHC may also take whatever steps are available at law to end the tenancy and/or recover monies paid to the tenant or other occupant as a result of the tenant's failure to provide required information or if they provide false or misleading information to MVHC.

Name	Signature	Date
Name	Signature	Date
Name	Signature	Date
Name	Signature	Date

To Be Completed by Authorized Metro Vancouver Housing Staff

Decision to conduct criminal record check? ☐ Yes ☐ No

Decision to conduct credit record check? ☐ Yes ☐ No

Past MVHC tenancy check? ☐ Yes ☐ No

Rent Registry check? ☐ Yes ☐ No

Offer to proceed? ☐ Yes ☐ No

Based on the information provided, the applicant and other occupants qualify for the following MVHC rental unit:

1) Income of $ _____

2) Number of occupants _____ thus unit size _____

3) Disability _____ explain _____

4) Senior's Unit (age 55 and older) _____ explain _____

5) Other (specify) _____

Current market rent for this rental unit is: $

Name	Title	Signature	Date