

# Akoma Holdings Inc

## Housing Application Form

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This application is being used to assess eligibility for both the affordable and market rate homes available in the Lake Loon Cherry Brook housing development. Any missing documentation will delay the processing of your application.

AHI is committed to protecting people's personal information. The personal information collected in this rental application is gathered solely for the purpose of assessing your suitability as a tenant, including verifying your identity, rental history, employment, and credit worthiness.

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### Step 1

#### Applicant 1 Personal Details

Salutation: Mr. Mrs. Ms. Miss

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth: mm\_\_\_\_/day\_\_\_\_/year\_\_\_\_\_

Social Insurance Number: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_

Current Address: \_\_\_\_\_ Apt.# \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

How long have you been at this address? \_\_\_\_\_

Previous address if less than 1 year: \_\_\_\_\_

Name of current landlord: \_\_\_\_\_ Phone: \_\_\_\_\_

Monthly rent: \_\_\_\_\_ Number of current bedrooms: \_\_\_\_\_

If you need help with this application please contact AHI at (782) 414 - 7377

Employer: \_\_\_\_\_ Contact name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

How long at this place of employment? \_\_\_\_\_

Term of Employment: \_\_\_\_\_ Position Held: \_\_\_\_\_

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## **Applicant 2 Personal Details**

Salutation: Mr. Mrs. Ms. Miss

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth: mm\_\_\_\_/day\_\_\_\_/year\_\_\_\_

Social Insurance Number: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_

Current Address: \_\_\_\_\_ Apt.# \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

How long have you been at this address? \_\_\_\_\_

Previous address if less than 1 year: \_\_\_\_\_

Name of current landlord: \_\_\_\_\_ Phone: \_\_\_\_\_

Monthly rent: \_\_\_\_\_ Number of current bedrooms: \_\_\_\_\_

Employer: \_\_\_\_\_ Contact name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

How long at this place of employment? \_\_\_\_\_

Term of Employment: \_\_\_\_\_ Position Held: \_\_\_\_\_

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## **Step 2**

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## Current Housing Information

Have you received an eviction notice in the last 5 years?      Yes              No

If Yes, why?

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Are you in a month-to-month lease?      Yes              No

Are you in a fixed term lease?      Yes              No

If a fixed term lease, when does your lease expire? \_\_\_\_\_

How much notice do you need to give? \_\_\_\_\_

Did you attend the community engagement session?      Yes              No

If No how did you find out about the housing at Lake Loon?

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Have you ever been a tenant in Public, non-profit, or cooperative housing?

Yes                      No

If Yes, which one? \_\_\_\_\_

Do you owe past rental income with any landlord?      Yes              No

If Yes, how much is owing and is there a written payment schedule?

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Do you have home insurance?      Yes              No

If Yes, who is it with? \_\_\_\_\_

How long have you had home insurance with them? \_\_\_\_\_

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When does it expire? \_\_\_\_\_

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## Step 3

### Housing Needs

Unit Size needed:            3 Bedroom            4 Bedroom

Do you have a rental subsidy            Yes            No

Will you need to apply for a rental subsidy?            Yes            No

What is your desired move in date? \_\_\_\_\_

Do you or any other applicant have a vehicle?            Yes            No

If Yes, how many? \_\_\_\_\_

Do you or any other applicant have a pet?            Yes            No

If 'Yes' indicate what you have, the breed, how many

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Do you or any other applicant have mobility challenges?            Yes            No

If Yes, please give details: \_\_\_\_\_

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Do you expect the number of people living with you to permanently change over the next 12 months due to family leaving or joining, etc.

Yes            No

If Yes, please explain with expected date of the household size change.

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## Step 4

### Income and Assets

*This information is to be completed on all household members over the age of 18 who earn income. Please provide the most recent Notice of Assessment. Each household member 18 years of age and older are to provide monthly income amounts for the following categories:*

<b>Applicant Last Name</b>				
<b>Applicant First Name</b>				
<b>Income Categories</b>	<b>\$/Month</b>	<b>\$/Month</b>	<b>\$/Month</b>	<b>\$/Month</b>
Alimony/Child Support				
Capital Gains				
Canada Pension Plan Disability				
Canada Pension Plan Other				
Dividends				
Employment Insurance				
Employment Income				
Foster Child Payment				
Gratuities				
Immigration Sponsorship				
Human Resource Development Canada				
Interest				
Old Age Security				
Guaranteed Income Supplement				
Spousal Allowance				
Other Country Social Security				
Other Income				
Other Pension				

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Rental Income				
RRSP/RIF				
Social Assistance				
Student Loan				
Workers Compensation				
Veterans Pensions & Allowance				
<b>Total Income</b>				

Total income for the household per month \$ \_\_\_\_\_

## Step 5

### Household composition

List yourself on line 1 then all persons who will be living in the unit

Full Name (Last/First)	Date of Birth	Relationship to Applicant	Type of Disability?	Do they live Full-Time with you now?		If no, how many days of the
				Yes	No	
				Yes	No	
				Yes	No	
				Yes	No	
				Yes	No	
				Yes	No	
				Yes	No	
				Yes	No	

## Step 6

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## Consent & Declaration

Please read carefully and tick each consent box:

- I acknowledge that I have read and understand the AHI Housing Information
- I consent to Akoma Holdings Inc (AHI) making the necessary inquiries to verify the information submitted in this application, including conducting a credit check, reference checks, follow up with former landlords, employer confirmation, etc
- I declare that all information provided in this application is true and accurate
- I understand that falsification of any or all of this information provided by me may be cause for the cancellation of the application
- I understand that it is my responsibility to advise AHI of any changes to the information provided
- I understand that it is my responsibility to ensure that all supporting documents necessary for the submission of a complete application are provided

## Step 7

### Confirmation of Completed Application

The following items are requirements in order to submit a completed housing application to AHI.

- Notice of Assessment for proof of income
- Eligibility check list
- Proof of student status
- Proof of insurance
- Credit check
- Landlord reference (2)
- Employer – Company name and contact

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- Signed application

**Applicant's Name:** \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_

**Application Date:** \_\_\_\_\_