

RESIDENCY HISTORY: Please list your addresses for the past **2 years**.

ADDRESS	FROM (DATE)	TO (DATE)	LANDLORD'S NAME	LANDLORD'S PHONE NUMBER
		PRESENT		

Have you or any member of your household ever lived in Capital Region Housing? Yes: ___ No: ___

If yes, please list address: _____

CURRENT ACCOMMODATION

What is your current monthly rent or mortgage payment? \$ _____

Is this a house _____ Apartment _____ Number of bedrooms _____

Reason for moving from current accommodation: _____

INCOME INFORMATION: List Gross Monthly Income (BEFORE DEDUCTIONS) for all members of your household from all income sources. PROOF OF INCOME DATED WITHIN THE PAST 3 MONTHS MUST BE ATTACHED FOR YOUR APPLICATION TO BE PROCESSED.
TO QUALIFY FOR HOUSING PLEASE SEE INCOME LEVELS BELOW.

NAME	INCOME SOURCE (include name of employer, EI, pensions, etc.)	MONTHLY INCOME
		\$
		\$
		\$
	TOTAL HOUSEHOLD GROSS MONTHLY INCOME	\$

INCOME QUALIFICATION – AFFORDABLE: Annual Income required to qualify for affordable housing. 2022 levels.

Affordable	Must be above:	Must be below:
Studio	\$47,501	\$77,430
1 bedroom	\$47,501	\$77,430
2 bedroom	\$61,001	\$120,990
3 bedroom	\$79,001	\$120,990
4 bedroom	\$84,501	\$120,990

Before sending in your Application for Accommodation, have you:

- Completed your application in full?
- Indicated your desired housing locations?
- Attached verification of your income dated within the past 3 months?
- Provided 2 years residency history including landlord names and phone numbers?
- Signed the application in the space below?

We will not be able to process your application without all of the required information completed.

DECLARATION

Please read and sign this statement.

I/We certify that the information on this form is true, correct and complete in every respect to the best of my/our knowledge and can be verified by the Corporation including obtaining credit and/or personal reports on me/us from one or more agencies or individuals.

I/We hereby authorize agencies or individuals to provide whatever information they have to the Corporation relative to assessment of the application.

I/We understand this application does not constitute an agreement on the part of the Corporation to provide me/us with rental housing.

Signed _____ Date _____

Signed _____ Date _____

Reviewed by _____ Date _____
Capital Region Housing Corporation

This form collects personal information in accordance with section 26(c) of the *Freedom of Information and Protection of Privacy Act* for the purposes of determining your eligibility, assessing your housing needs and to determine the housing developments that suit your needs. Please contact Senior Manager, Regional Housing, Box 1000, 625 Fisgard Street, Victoria, BC V8W 1R7, Tel. 250-360-3371 if you have inquiries about the collection or use of this information.

PLEASE NOTE: Applications expire after 12 Months. Please contact our office at crdhousing@crd.bc.ca every 3 months to renew your application and to update any information that has changed. Expired applications and any documents you submitted will be securely destroyed 12 months after expiry. If you are deemed ineligible for the housing you applied for, your application and any documents you submitted will be securely destroyed 12 months after a letter is sent to notify you of your ineligibility.

Updated May 20, 2022