

## **YQFN - NEW HOUSING AND RENOVATION FORM**

## INSTRUCTIONS FOR COMPLETING APPLICATION

Applications with greatest need: shown by the application will be assisted according to the points assigned to them.

It is impossible to say how long it will be before you receive assistance.

If you are selected for housing and a renovation you will be contacted by our housing team.

Please choose what type of Housing and/or Renovations you are looking for:

- ➤ CHMC housing requires you to pay rent and non-payment will not be tolerated. Tenant Agreements are signed with the client and will be adhered to. YQFN (CMHC) Tenant Agreements are legal contracts and a client's refusal to abide by the terms and could lead to eviction.
- ➤ Band Housing is limited. The funding for Band Housing comes directly from Band Based Capital or other committed areas.
- ➤ Old Housing. This house is an old house which someone has moved out of and has become vacant. It is the responsibility of the housing department to fill vacant houses **NOT THE PREVIOUS TENANT**.
- > TLE Units are only funded through Band Funding and are limited. They are allocated to sites on the old TLE sites. These sites do not have adequate water and sewer system and YQFN will not be held liable for the new sites water and sewer problems.
- ➤ Minor Renovations, is under \$2,500, funding for this type of renovation is adequate.
- Major Renovations is over \$2,500, funding for this type of renovation is limited.

## PLEASE READ CAREFULLY AND ANSWER ALL QUESTIONS TO THE BEST OF YOUR ABILILTY. PLEASE ATTACH COPIES OF DOCUMENTS THAT MAY ASSIST YOUR APPLICATION WHERE APPLICABLE

- Personal Letter which explains your need
- Confirmation letter
- ➤ Reference forms/letters

	ouse   ld TLE lands I	House lew TLE land House		
re yo	ou applying for a Renova	ation? YES, Minor Renovation YES, N	lajor Renovation No	
1.	NAME			
	Age Date of Birth Treaty #			
	Marital Status: Single	Widowed Separated/Divorced	Married/Common Law	
2.	SPOUSE/ CO APPLICAN	IT NAME		
_	Age:			
3.	Present Address:			
	How long have you lived at this address?YearsMonths  How many rooms in your house where you live now?			
	Who do you currently live with? List family in house and dependants			
	NAME: RELATIONSHIP TO YOU: AGE:			
	IVAIVIE.	RELATIONSHIP TO TOO.	AGE.	
4	Are you over crowded	2 Yes No		
4. 5.	Are you over crowded Do you have special no		ds? Yes No	
	Do you have special no	Property of the second of the	ds? Yes No	
5.	Do you have special no	eed dependants OR are you special need	ds? Yes No	
5. <b>6.</b>	Do you have special no Do you have any medi	eed dependants OR are you special need ical conditions? If yes please describe		
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Points System		
Question 1	Question 2	
Question 3	Question 4	
Question 5	Question 6	
Question 7	Question 8	
Question 9	Question 10	
FOR OFFICE USE	ONLY TOTAL PO	INTS SCORED
YEAR		
HOME VISIT UNDERTAKEN, ea	h person gives a points r	rating out of 5
#1 #2 #3	Average p	oints for HV
TOTAL POINTS FOR HV	<del></del>	
SIGNED BY PUBLIC WORKS COORDINATOR		