

Market Housing Application

App ID:

Updated:

(dd/mm/yy)

DATE RECEIVED BY LHO:

(dd/mm/yy)

APPLICANT

LAST NAME _____

FIRST NAME _____

MIDDLE NAME _____

GENDER _____

.....

BIRTHDATE _____ SOCIAL INSURANCE # _____

.....

SENIOR[] _____

MARITAL STATUS _____

.....

HOME ADDRESS: UNIT # _____

.....

MAILING ADDRESS: STREET OR BOX # _____

.....

COMMUNITY _____ POSTAL CODE _____

.....

HOME / ALTERNATE / WORK PHONE # _____

.....

EMAIL _____

.....

Date of Arrival in the NWT Community: (dd/mm/yy) _____

.....

.....

If less than 6 years, provide previous address below.

COMMUNITY DATE

CO-APPLICANT

LAST NAME _____

FIRST NAME _____

MIDDLE NAME _____

GENDER _____

.....

BIRTHDATE _____ SOCIAL INSURANCE # _____

.....

SENIOR[] _____

MARITAL STATUS _____

.....

HOME ADDRESS: UNIT # _____

.....

MAILING ADDRESS: STREET OR BOX # _____

.....

COMMUNITY _____ POSTAL CODE _____

.....

HOME / ALTERNATE / WORK PHONE # _____

.....

EMAIL _____

.....

Date of Arrival in the NWT Community: (dd/mm/yy) _____

.....

.....

If less than 6 years, provide previous address below.

COMMUNITY DATE

Market Housing Application

NAME ALL OF THE PEOPLE WHO ARE LIVING WITH YOU NOW

✓	Name	DOB (dd/mm/yy)	Gender	Relationship to Applicant #1
			M/F	
			M/F	
			M/F	
			M/F	
			M/F	
			M/F	
			M/F	
			M/F	
			M/F	
			M/F	
			M/F	
			M/F	
			M/F	

Place a check (✓) mark beside household members that will move into the market housing unit with you.

» Does the applicant or co-applicant have arrears with 'ANY' Local Housing Organization in the NWT?

NO. If YES where _____ \$ _____

If YES, do you have a current repayment plan? **YES / NO**

» Does any other member of the household have arrears with 'ANY' Local Housing Organization in the NWT?

NO. If YES where _____ \$ _____

If YES, do you have a current repayment plan? **YES / NO**

» Does the applicant or co-applicant have arrears with the NWT Housing Corporation?

NO. If YES where _____ \$ _____

If YES, do you have a current repayment plan? **YES / NO**

» Has either the applicant/co-applicant or any member of the household had a previous tenancy agreement terminated?

YES / NO

» Has either the applicant/co-applicant or any member of the household been evicted from public housing?

YES / NO. If YES when _____

» How many bedrooms do you require? _____

» Will the Power Corporation accept your application to open an account? **YES / NO**

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EMPLOYMENT OR SOURCE OF INCOME

APPLICANT

Present Employer or Source of Income	Total Monthly Gross Income
	\$
	\$
	\$
	\$

Previous Employer or Source of Income (if less than 1 year)	Total Monthly Gross Income
	\$
	\$
	\$
	\$

CO-APPLICANT

Present Employer or Source of Income	Total Monthly Gross Income
	\$
	\$
	\$

Previous Employer or Source of Income (if less than 1 year)	Total Monthly Gross Income
	\$
	\$
	\$

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ASSET INFORMATION - VEHICLE

APPLICANT

License Plate No.	Make	Model	Year

CO-APPLICANT

License Plate No.	Make	Model	Year

REFERENCE CHECK FROM PREVIOUS LANDLORD

Name	Address	Phone

PERSONAL REFERENCE CHECKS

Name	Address	Phone

CREDIT CHECKS

Applicant Name	Description	Credit Ranking

Market Housing Application

DECLARATION

I/we certify that the statements made in this application are true and complete. If any of these statements are found to be untrue this application may be rejected.

I/we further agree and consent that credit inquiries and reference checks may be made at any time.

_____	_____	_____	_____
Applicant's Signature	dd/mm/yyyy	Co-Applicant's Signature	dd/mm/yyyy

"This personal information is being collected under the authority of the NWT Housing Act and will be used to determine your eligibility for market housing. Information is protected by the privacy provisions of the Access to Information and Protection of Privacy Act. If you have any questions about the collection of information, contact your local housing office".

Market Housing Application

FOR LHO OFFICE USE ONLY

EVALUATION OF THE APPLICATION

LOCATION:	UNIT:
MONTHLY RENT:	SECURITY DEPOSIT:
DATE RECEIVED:	RECEIVED BY:
DATE OF APPLICATION:	Application ID:
DATE REVIEWED:	REVIEWED BY:
DATE OF OCCUPANCY:	PRO-RATED RENT:
LEASE PERIOD:	APPLICANTS POINTS:

Application Suitability
History of rental arrears or poor credit rating or unacceptable upkeep or damage to present and/or previous dwelling(s) or whose personal habits are KNOWN to cause damage to a housing unit and adversely disturb the "quiet enjoyment" by neighbours?
NO, if YES - Specify details

ELIGIBILITY

I have reviewed this application and consider this applicant to be:
☐ Eligible ☐ Not eligible - to be point-rated for market housing.

LHO Signature	Date (dd/mm/yyyy)
Approval Signature	Date (dd/mm/yyyy)