



TENANT APPLICATION FORM

The K'ómoks Elderplex was built as a subsidized housing project, to offer affordable, safe, comfortable, and accessible living for our Nation's Elders.

With the guidance of KFN Elders, the K'ómoks Elderplex Housing Policy including eligibility requirements and selection criteria, were developed following these guiding principles:

- Ensure fairness in the housing process
- Improve quality of housing to improve quality of life
- Support the most vulnerable Elders in our community
- Treat our Elders with dignity and respect, and honour their privacy.

WHO SHOULD APPLY?

You may be eligible for housing in the K'ómoks Elderplex if you:

- Are a KFN Member
- Are 55+
- Earn less than \$60k/year (single applicant) or less than \$80k/year (joint applicants)
- Own less than \$250,000 in assets
- Commit to divest any property
- Are in compliance with KFN laws

K'ÓMOKS ELDERPLEX

3123 and 3125 Tatpoos Road

SIX UNITS

Four 1-bedroom units and
Two 2-bedroom units

RENTAL RATES

Monthly rent includes cable, internet, Hydro, grounds maintenance and rental content insurance:

1-bedroom unit: \$575/month

2-bedroom unit: \$750/month

PURPOSE OF THIS FORM

This form collects personal information in accordance with Section 26(c) of the Freedom of Information and Protection of Privacy Act. K'ómoks First Nation (KFN) is only collecting your personal information to determine your eligibility for the K'ómoks Elderplex. All applications will be handled with strict confidentiality.

HOW TO APPLY:

You will need to submit:

1



The attached form,
completed

2



Your most recent
Income Tax
Notice of Assessment

Submit these to the KFN Housing Department:



by email:

housing@komoks.ca



in person:

**3330 Comox Road, in
Courtenay, BC**

You may be contacted to provide additional information and supporting documents.



NEED HELP?

Please contact KFN Housing at **250 339 4545** or
housing@komoks.ca.

K'ómoks Elderplex Complex Rules

- Exterior:** Please do not make any changes or affix anything to the exterior of the buildings (siding, doors, etc.).
- Front entry way:** Please keep your personal belongings clear of front entry ways, to ensure safe access to units. Mobility devices are permitted.
- Garbage:** Please use the communal bin provided to dispose of your household garbage and recycling.
- Guests:** Guests are only permitted to stay up to 14 consecutive days or within a month. You must apply to the Housing Department for any extensions.
- Home businesses:** Home-based businesses are not permitted.
- Maximum occupancy:**
- 1-bedroom unit: 1 person or 2 people in a couple
 - 2-bedroom units: 2 people
 - Any exceptions for extenuating circumstances must be approved by the Housing Department
- Noise:** Be mindful of others by not making too much noise. Quiet time between 10 pm and 8 am.
- Parking:** Each tenant has the use of the parking in front of their unit. Guests can use additional visitor parking spots or street parking.
- Pets:** No pets allowed.
- Smoking:** Smoking of any kind is only permitted in the designated area, using the fire-safe ashtray.
- Subletting:** Unit subletting is not permitted.



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FOR OFFICE USE ONLY – APPLICATION #:

1. Applicant Eligibility

Are you a K'ómoks First Nation Member aged 55 or older?

Yes

If **Yes**, please provide your status number:

No

If **No**, please do not continue with this application.

2. Applicant Information

First name: _____ Last name: _____

Nickname/alias: _____ Date of birth: _____

 Phone number: _____  Email: _____

 Street address: _____

City, province, postal code: _____

Emergency contact name: _____  Emergency contact phone: _____

3. Joint Applicant or Authorized Occupant

Is there anyone applying to **live with you** at the K'ómoks Elderplex?

Yes

No (please proceed to **Section 4**)

If **Yes**, does this person meet **ALL** of the following the K'ómoks Elderplex eligibility requirements?

They are a KFN Member aged 55 or older

They do not own over \$250,000 in assets

Together with you, your joint annual income is under \$80,000

If **Yes**, then please also fill out the **Joint Applicant Application Form**.

If **No**, please fill out the **Authorized Occupant Application Form**.



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4. Income Information

The K'ómoks Elderplex is a subsidized housing project designed to provide below-market housing to KFN Elders in need. A "need" may be present for those Elders whose income is limited.

A

Please submit your most recent
Income Tax Notice of Assessment



B

Please also **answer the questions below with any additional income details** not captured in your most recent tax filings.

Has your **income changed significantly since your last tax filing?**

Quantify approximate increase or decrease.

Do you expect any **significant changes to your income** in the near future?

Quantify approximate increase or decrease.

Do you have **any additional income not included in your income tax filing?**

I.e. rental income, dividends, etc.



If you need help accessing your latest Notice of Assessment,
please contact the KFN Social Development Co-ordinator at **250 339 4545**.



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5. Disclosure of Real Estate Assets and Divestment of Property

To be eligible for the K'ómoks Elderplex, Elders must commit to divesting any property holdings within six months of their tenancy beginning. Limited exceptions for CP holders may apply, based on family members' membership status. Legal documentation will be required to confirm the divestment has indeed taken place.

Do you own any property, in sole or joint partnership?

Yes

No (please proceed to **Section 6**)

If **Yes**, please list addresses of any property holdings below:

Type of Property (e.g. primary residence, cabin, investment property, etc.)	Address	Mortgage?	% Ownership
_____	_____	<input type="radio"/> Yes <input type="radio"/> No	_____
_____	_____	<input type="radio"/> Yes <input type="radio"/> No	_____
_____	_____	<input type="radio"/> Yes <input type="radio"/> No	_____

If you listed any properties above, please share your plans to divest your property, should you be selected for tenancy at the K'ómoks Elderplex:



The value of your property divestments (after mortgage, tax or any other financial obligations are met) counts towards your asset disclosure.



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6. Disclosure of Other Assets

The K'ómoks Elderplex is a subsidized housing project designed to provide below-market housing to KFN Elders in need. Please disclose if you own more than \$250,000 in assets.



Please do not include real estate holdings in this section, as those should be disclosed in the property disclosure section above.

Assets include:

- Stocks, bonds, term deposits, mutual funds and cash
- Business equity in a privately incorporated company, including cash, GICs, bonds, stocks or real estate equity
- TFSA

This does NOT include:

- Personal items such as vehicles, jewelry and furniture
- RRSP, RESP, RDSP, RRIF

Do you own assets valued over \$250,000?

This includes assets you own solely, or your portion of any joint assets.

Yes

No (please proceed to **Section 7**)

If **Yes**, please provide details below:

Name of asset

Total Value

% Ownership

Name of asset	Total Value	% Ownership
_____	_____	_____
_____	_____	_____
_____	_____	_____

I agree to provide additional documentation about my finances (income, assets and any properties), should it be requested by the KFN Housing Department.



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7. Current Living Conditions

The K'ómoks Elderplex was built to provide safe and affordable housing to those KFN Elders in need. "Need" can refer to current housing being unaffordable, unstable, unsafe or unhealthy.

How much do you currently pay in rent or mortgage per month?

If you do not pay monthly for housing, please write "N/A".

\$ _____

Please select any that apply:

- My current housing is unstable (e.g. tenancy is ending or is temporary in nature)
- My current housing presents health and safety concerns

If you selected either or both of the above, please provide any additional details that could be relevant, e.g. your move-out date, specific health and safety concerns, etc.:



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8. Health Conditions and/or Disabilities

The K'ómoks Elderplex was built to provide safe and affordable housing to those KFN Elders in need. "Need" may refer to health conditions, both physical and mental, as well as accessibility requirements.

Please select any health considerations that apply to your application:

- Trauma and mental health
- Accessibility and physical health

If you selected either or both of the above, please provide any additional details that could be relevant:

- I agree to provide additional documentation about medical issues, should it be requested by the KFN Housing Department.



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9. Additional Information (optional)

Please let us know if there are any other factors about you or your current living situation that would increase your need for safe and affordable, subsidized housing.

For example: how the quality of your housing is impacting your quality of life, if location is a factor, any significant medical expenses, etc.

10. Pets

The K'ómoks Elderplex has a “no pets” policy.

Please select from the following:

- I will **not** be bringing pets to the K'ómoks Elderplex.
- I have a guide animal and I agree to provide all necessary care for my guide animal.

Provide details about this guide animal: *Type of guide animal, certification level, etc.*

11. Smoking

Smoking of any kind is only permitted in the designated covered area using a fire-safe ashtray, not in or around the units.

- I agree to follow the smoking policy of the K'ómoks Elderplex.



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Tenant Declaration and Consent *Please read, initial and sign.*

I declare:

- This is my application.
- The information provided herein is true and correct. I realize that any false information provided will result in cancellation of my application.
- It is my responsibility to inform KFN Housing if any of the information (contact, financial, etc.) on my application changes.

I authorize:


- KFN Housing to make any necessary inquiries to verify the information given in this application.
- Any person, corporation, or social agency to release to KFN Housing any information pertinent to the assessment of my application.

I understand:

- This application is not an agreement by KFN Housing or its members to provide me with housing.
- That if I am being considered for an available unit, KFN Housing will gather additional information to assess my ability to uphold the obligations of a tenancy agreement and that I will provide any additional supporting materials requested.
- That false information given by me may result in my application being withdrawn from consideration.
- I agree that, should my application to live at the K'ómoks Elderplex be successful, the rental unit will be my primary residence.
- If I wish to withdraw from this Declaration and Consent, I may contact KFN Housing. However, the withdrawal will result in my no longer being considered for housing at the K'ómoks Elderplex.
- I am required to provide Proof of Income (i.e. Income Tax Notice of Assessment) as part of my application package.

<input type="text"/>	<input type="text"/>	<input type="text"/>
Print Applicant Name	Signature	Date

If you are filling out this form online, please sign by typing your name in the signature box.

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