

**APPLICATION FOR TENANCY**

**BETHEL SENIOR CITIZENS' HOUSING SOCIETY (DAWSON CREEK)**

**Building known as: HERITAGE HEIGHTS**

#122 - 11335 - 17th Street  
Dawson Creek, B.C. V1G 4S7  
TeleFax: (250) 782-1840

NAME OF APPLICANT (Mr. \_\_\_\_ Mrs. \_\_\_\_ Miss \_\_\_\_) \_\_\_\_\_

PHONE NO. \_\_\_\_\_ ADDRESS \_\_\_\_\_

**PERSONAL DATA OF ALL PERSONS TO LIVE IN ACCOMMODATION:**

NAME	RELATIONSHIP	DATE OF BIRTH DAY / MO. / YR.	AGE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*(Information required for safety of Tenants (this will be used only with your consent, in a medical emergency or if requested through a legal means, i.e. police, court order, etc.)*

NEXT OF KIN \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_

ADDRESS \_\_\_\_\_

DOCTOR \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_

ADDRESS \_\_\_\_\_

HEALTH (Any Disabilities) \_\_\_\_\_

**FINANCIAL INFORMATION: *(Provision of this information is optional, however rent will be pegged at market value if no information is provided. This information will be used by the Society only for the purpose of applying for rent subsidies on your behalf.)***

Heritage Heights rent is based on the premise that people in need should not have to pay more than 30% of their income for rent. If this is applicable, please fill out the following:

a) Income (Gross Monthly):	Self	Spouse
Employment	_____	_____
Canada Pension	_____	_____
Old Age Security	_____	_____
Employment Pension	_____	_____
Investment Income	_____	_____
Other	_____	_____

b) Property: Location: \_\_\_\_\_

Length of Residence at present address \_\_\_\_\_ in British Columbia \_\_\_\_\_

Accommodation now desired: 1st Floor \_\_\_\_\_ 1 Bdrm \_\_\_\_\_ Handicapped \_\_\_\_\_

2nd Floor \_\_\_\_\_ 1 Bdrm \_\_\_\_\_ 2 Bdrm \_\_\_\_\_

(over)

DATE OF APPLICATION \_\_\_\_\_

Signature \_\_\_\_\_

\* \* \* \* \*

**PRESENT ACCOMMODATION:**

\_\_\_\_\_ House - Number of Bedrooms \_\_\_\_\_

\_\_\_\_\_ Apartment - Number of Bedrooms \_\_\_\_\_

\_\_\_\_\_ Rooming House \_\_\_\_\_ Private Kitchen

\_\_\_\_\_ Mobile Home \_\_\_\_\_ Shared Bathroom

\_\_\_\_\_ Living with Family or Friends

Present Rent \$ \_\_\_\_\_ Have you received Notice to Vacate? \_\_\_\_\_

or What are your total monthly costs (mortgage, rent, taxes, heating, etc.)

\$ \_\_\_\_\_

Why do you wish to move? \_\_\_\_\_

Please add any additional information pertinent to your housing need.

Do you smoke? Yes \_\_\_ No \_\_\_ How often do you use alcohol? Never \_\_\_ Seldom \_\_\_ Regularly \_\_\_

Have you ever been a tenant of B.C. Housing Management Commission? \_\_\_\_\_

If Yes, give

Address: \_\_\_\_\_ Dates: \_\_\_\_\_

**References: (i.e. former landlord)**

Name: \_\_\_\_\_ Phone no. \_\_\_\_\_

Name: \_\_\_\_\_ Phone no. \_\_\_\_\_

**Please Note:**

- That prospective tenants of Heritage Heights must be able to care for themselves and be in reasonable health. **New tenants of Heritage Heights must be non-smokers.** Management of Heritage Heights has the obligation and duty to terminate the stay of residents, who become, in the opinion of management, unable to maintain and care for themselves.

- Bethel Senior Citizens Housing Society values Personal Privacy and will handle your private information with care. Having provided any information on this Application for Tenancy constitutes your consent for Bethel Senior Citizens Housing Society to use the information to manage Heritage Heights. Information provided in this form will be used to assess eligibility for tenancy. If approved for tenancy, the information will be retained in a secure filing cabinet and will be used during the rent review process and for emergency contact situations that may arise. For a complete statement of the use and care of personal information, please contact the Privacy Office of Bethel Senior Citizens Housing in writing at the address noted at the top of the form.

- As part of ensuring security and safety in Heritage Heights, surveillance cameras have been installed to monitor the entrances and exits to the facility. Submitting this application constitutes your consent to being photographed and to the use of these tapes in accordance with policy.