

**To submit your application:**

1. Fill out the form
2. Save (print to pdf) to your computer
3. Email saved form to [westboine.coop@shawcable.com](mailto:westboine.coop@shawcable.com)

<b>FOR OFFICE USE ONLY</b> <b>Name:</b>
<b>Suite #:</b>
<b>Occupancy Date :</b>
<b>Waiting List :</b>



## **Congratulations!**

You have chosen to apply for membership in a housing co-operative which is not only the choice of a new home, but also the choice of a new lifestyle. A housing co-op is a housing development and a unique community where the people who live here own the property collectively and operate the facility on a non-profit basis. The members run the operation by electing a Board of Directors from amongst themselves and the Board hires staff to administer the business affairs of the Co-op.

The rights and benefits of co-op membership are quite different and considerably more extensive than those of a tenant in a private rental situation. However, the same applies to the responsibilities of co-op members. The prime responsibility of co-op membership—that of participation—is at the same time one of the primary advantages.

<b>BENEFITS / RIGHTS</b>	<b>RESPONSIBILITIES / OBLIGATIONS</b>
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**Security of Tenure:** As long as you fulfill your obligations to the co-op, you can feel secure that you will not have to move unless by choice. No landlord can come along and sell your home out from under you.

**Cost Control:** Monthly housing charges only increase as much as necessary to meet increased operating costs. Members also determine some of the costs by voting on what level of services they wish to provide.

**Other Economic Advantages:** Our association with a national and provincial federation of housing co-operatives results in lower costs for insurance, supplies, and services.

**Control of Surroundings:** Though the democratic process members determine, as a group, the kind of environment in which they will live.

**Satisfaction of Social Needs:** A housing co-op creates a sense of community through participation in the co-op and working together.

**Purchase of Shares:** to pay the required fee for membership.

**Monthly Charges:** To pay promptly and on time the housing charges and other monthly costs as set by the general membership.

**Unit Condition:** To maintain your unit in good condition and report maintenance issues to the office immediately.

**Common Areas:** To protect and maintain common areas for everyone's mutual benefit and safety. This includes things such as cutting grass, shoveling snow, picking up garbage, etc., etc.

**Good Neighbours:** To get along peaceably with your neighbours and find co-operative solutions to disagreements.

**Participate:** To participate in the decision making process and co-op activities by attending General Meetings, serving on the Board, or joining a Committee or a Working Group.

32 Shelmerdine Drive Winnipeg Manitoba R3R 2Y2 Facsimile (204) 896-4845 TELEPHONE (204) 885-5125  
[westboine.coop@shawcable.com](mailto:westboine.coop@shawcable.com) ENDPAGEONEOFSIX-APPLICATIONFORM

**THE UNITS AT WESTBOINE PARK HOUSING CO-OP  
ARE NON SMOKING**

# APPLICATION FORM

Applicant # 1:  
Name: \_\_\_\_\_  
Surname given names

Applicant # 2  
Name: \_\_\_\_\_  
Surname given names

Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Work: \_\_\_\_\_

Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Work: \_\_\_\_\_

Date of Birth \_\_\_\_\_  
Month / Day / Year

Date of Birth \_\_\_\_\_  
Month/ Day / Year

**All Other Members of the Household:**

Name	Date of Birth M / D / Y	Dependent Y / N

**HOUSING INFORMATION:**

How long have you lived at your current address? \_\_\_\_\_

How much do you pay in rent/mortgage payment each month? \_\_\_\_\_

If you pay for utilities, how much do you pay? \_\_\_\_\_

Landlord / Mortgage Co. Name & Phone Number: \_\_\_\_\_

**If you have lived there for less than 2 years, please give previous address as well as landlord Name and Number#**

**EMPLOYMENT INFORMATION:**

**APPLICANT # 1:**

Current Employer Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Position Held: \_\_\_\_\_ How Long \_\_\_\_\_

Salary: \_\_\_\_\_/Week \_\_\_\_\_/Bi-weekly/ \_\_\_\_\_/Month/ \_\_\_\_\_ Year \_\_\_\_\_

1st Previous Employer Name: \_\_\_\_\_

Position Held: \_\_\_\_\_ How Long: \_\_\_\_\_

**APPLICANT #2**

Current Employer Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Position Held: \_\_\_\_\_ How Long: \_\_\_\_\_

Salary: \_\_\_\_\_ Week/ \_\_\_\_\_ Bi-weekly/ \_\_\_\_\_ Month/ \_\_\_\_\_ Year/ \_\_\_\_\_  
1<sup>ST</sup> Previous Employer Name: \_\_\_\_\_

Position Held: \_\_\_\_\_ How Long: \_\_\_\_\_

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One parking stall is supplied with the unit at the cost of \$20.00 per month.

Additional parking stall can usually be obtained through the office for a nominal fee.

**PARKING:**

Do you require more than one Parking Stall? Yes or No

**PETS**

Pets are allowed in the Co-op subject to strict adherence to the Policy,  
Pets are allowed in both the townhomes and apartments. A maximum of 2  
"Non-Contained" pets per townhome unit; In the apartments pets must be under 20 lbs. Only 2  
contained "rodents" (i.e. Gerbils, guinea pigs, rats, mice, rabbits, etc.) are allowed in a unit. All pets  
must be preapproved by the office before arriving at the co-op, no reptiles allowed, and all pets  
must be licensed according to city bylaw and proof provided to the office If you have pets, please  
complete the following:

**DOG(S):** How many? \_\_\_\_\_ Weight: \_\_\_\_\_  
Description: (breed, colour, etc.)

**CAT(S):** How many? \_\_\_\_\_  
Description: (breed, colour, etc.)

**OTHER(S):**

## PARTICIPATION

**Community participation and involvement are what makes a co-op different from other housing options.** Because the co-op is owned by the members who live here, we require your input and help from time to time. Please check off any skills which you have that you would be willing to volunteer for the benefit of the co-op.

	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Babysitting	<input type="checkbox"/>	Playground Renewal Project	<input type="checkbox"/>
Help with Kid's Parties	<input type="checkbox"/>	Newsletter Committee	<input type="checkbox"/>
Event Planning (BBQs, kids parties, etc.)	<input type="checkbox"/>	Pet Committee	<input type="checkbox"/>
Baking	<input type="checkbox"/>	Library Workgroup	<input type="checkbox"/>
Yard Work for Others (mow grass, shovel snow)	<input type="checkbox"/>	Gardening Workgroup	<input type="checkbox"/>
Handy-Person (carpentry/painting, odd jobs, etc.)	<input type="checkbox"/>	Fund Raising	<input type="checkbox"/>
Arts / Crafts	<input type="checkbox"/>	Other _____	<input type="checkbox"/>
Phoning _____	<input type="checkbox"/>	Other _____	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>
TIME (for work bees)	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>

What skills / experience / interests do you have that you fell would make you particularly suited to Co-op living?

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## DECLARATION

I/we understand that Westboine Park Housing Co-op Ltd. is formed for the purpose of providing housing at cost to its members and I/we hereby apply for membership in Westboine Park Housing Co-op Ltd.

I/we understand that accommodation in Westboine Park Housing Co-op Ltd. depends on being accepted for membership in the Co-op. I/we also understand that, if the co-op accepts me/us for membership and offers us a unit, I/we must make a one-time purchase of shares in the amount of **\$ 200.00** prior to our move-in date. We also require a \$1200.00 damage deposit payable 1 week prior to move in date. Upon viewing a unit if you would like to secure the unit we require \$200.00 of the damage deposit to be paid at that time to secure the unit this deposit is nonrefundable.

I/we declare that the information contained herein to be true and correct and hereby authorize Westboine Park Housing Co-op Ltd., its employees and agents, to conduct such personal investigations as may be required to process this application, verify my / our continuing eligibility, and recover any indebtedness arising hereunder.

I/we acknowledge that Westboine Park Housing Co-op Ltd. may divulge information from my tenancy file in accordance with provisions of the Personal Investigations Act. In the event that I/we have any special requirements for confidentiality of such information, I/we will so advise Westboine Park Housing Co-op Ltd. in writing.

Signed this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_ at the City of Winnipeg.

**This application form must be signed by all household members over 16 years of age.**

\_\_\_\_\_  
\_\_\_\_\_

.....

<b>PERSONAL PROFILE:</b> Applicants Name:	
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**CO-OP LIFESTYLE / INVOLVEMENT**

How did you hear about our Housing Co-op?

\_\_\_\_\_  
If you were referred by a resident/member of Westboine Park please provide his/her name.

\_\_\_\_\_  
Why did you choose to apply for residency in our Housing Co-op?

\_\_\_\_\_  
Can you tell us how long you think your length of stay at Westboine Park will be?

\_\_\_\_\_  
In your opinion, what is a housing co-op?

\_\_\_\_\_  
What do you expect to gain by residency in Westboine Park?

\_\_\_\_\_  
Have you ever lived in a housing co-op before?      Yes,      No Have you ever served as a volunteer, if so, in what capacity and why?

\_\_\_\_\_  
Do you agree or disagree with the fact that some “operating guidelines” are required in order to ensure the smooth operation of the housing co-op?

Agree      Disagree      Why?

\_\_\_\_\_

What is the difference, in your opinion between living in a single-family dwelling as compared to a townhome or apartment?

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How would you resolve a misunderstanding with a neighbor should it arise?

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How would you deal with adults and or children that abuse, vandalize or neglect the co-op and property should it occur?

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How would you be willing to contribute to the betterment of our community?

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**FINANCIAL**

How important is your personal credit rating?

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Assume that if you could not pay your housing charges on the 1<sup>st</sup> of the month, how would you deal with such a situation?

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How would you react to being assessed a \$35.00 late penalty fee after the 1<sup>st</sup> business day, and how would you deal with it? How do you react to a \$50.00 fee for any payment returned by financial institution for any reason? Do you think that would be fair?

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Do you believe that your present income can meet and support the present housing charges?

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If financial assistance were needed to meet your housing charge, what level of contribution would you be able to make towards your charges?

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**MAINTENANCE:**

How quickly do you think a repair should be reported to the office?

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What is a reasonable time frame for response to your request for repairs?

Hours: \_\_\_\_\_ Days: \_\_\_\_\_ Week: \_\_\_\_\_

How would you contribute to the exterior appearance and beautification of the housing co-op?

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The co-op practices and enforces Fire Safety Regulations by the City of Winnipeg, which may require unscheduled access to your unit/suite. What are your feelings on this?

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Please explain briefly how you would maintain the exterior condition of your unit/suite and yard/patio/balcony in Summer? \_\_\_\_\_

And in Winter? \_\_\_\_\_

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**PETS:**

Do you own a pet?                      Yes                      No  
If yes, how many pets do you have \_\_\_\_\_ and what type of pets do you have?

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What are your thoughts on “Stoop & Scoop”, animals running loose and size of animals for your co-op home?

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Do you feel the co-op should have any restrictions on the size and number of pets a member can have in their unit?

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Signature 1<sup>st</sup> Applicant

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Signature 2<sup>nd</sup> Applicant

Date: \_\_\_\_\_





**AGREEMENT TO CO-SIGN**

Co-Signer for : \_\_\_\_\_ Unit # \_\_\_\_\_

CO-SIGNER NAME: \_\_\_\_\_

S.I.N. # : \_\_\_\_\_ Telephone: \_\_\_\_\_  
(Work) \_\_\_\_\_

Present Address: \_\_\_\_\_ How Long: \_\_\_\_\_

Present Landlord: \_\_\_\_\_ Telephone: \_\_\_\_\_

Former Address: \_\_\_\_\_ How Long: \_\_\_\_\_

Former Landlord \_\_\_\_\_ Telephone: \_\_\_\_\_

Present Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_

Position Held: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

How Long Employed Here: \_\_\_\_\_ Income: \_\_\_\_\_

Former Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_

I \_\_\_\_\_, **AGREE TO PAY ANY AND ALL AMOUNTS OWING BY \_\_\_\_\_ FOR HOUSING CHARGES, FEES, AND DAMAGE CAUSED DURING THE TIME OF HIS / HER MEMBERSHIP IN WESTBOINE PARK HOUSING CO-OP LTD. I/We hereby declare that the foregoing information is true and complete. I/We agree to provide WESTBOINE PARK HOUSING CO-OP LTD. with a credit check and personal information, we also consent to a personal investigation into our information.**

Signed this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_ at the City of Winnipeg.

\_\_\_\_\_

Signature  
Shelmerdine Drive Winnipeg Manitoba R3R 2Y2 Facsimile (204) 896-4845 TELEPHONE (204) 885-5125

Witness: 32



## WEIGHT LIMITATION FOR DOGS

Pet Section of the Westboine Park Housing Co-operative Policies state that; *the MAXIMUM weight allowed is 38.5 kg or 85 lbs. for townhomes and 9.07 kg or 20 lbs. for apartments.*

Please have the following form completed by your veterinarian and returned the Westboine Park Housing Co-op office prior to move-in

Pet Owner: \_\_\_\_\_

Unit Number: \_\_\_\_\_

Breed of Dog: \_\_\_\_\_

Weight of Dog: \_\_\_\_\_ kg. or \_\_\_\_\_ lbs.

Age of Dog: \_\_\_\_\_

Estimated weight of Dog: \_\_\_\_\_ kg. or \_\_\_\_\_ lbs.

Name and Address of Veterinarian \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**All pets must be pre-approved by the office and proof of license must be provided along with up to date medical i.e. shots before they can enter the Westboine Park housing co-op property**

**PLEASE FILL OUT THIS FORM AND GIVE IT TO THE WESTBOINE PARK HOUSING  
CO-OP ADMINISTRATION OFFICE**

**Authorization to Release information**

**This document authorizes Westboine Park Housing Co-op Management at 32  
Shelmerdine Drive, Winnipeg, Manitoba R3R 2Y2 to release information to  
Westboine Park Housing Co-op Ltd. about your occupancy at:**

**This may include information such as**

- rent payments**
- length of residence**
- unit condition**
- details about any complaints (parking, noise, etc.)**
- details of lease expiration**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature- Applicant # 1

\_\_\_\_\_  
Print Name- Applicant # 1

\_\_\_\_\_  
Signature – Applicant # 2

\_\_\_\_\_  
Print Name – Applicant # 2

**PLEASE FILL OUT THIS FORM AND GIVE IT TO YOUR EMPLOYER OR TO THE  
PERSON WHO CAN VERIFY YOUR INCOME**

**Authorization to Release Information**

This document authorizes \_\_\_\_\_  
(employer)

To release information to Westboine Park Housing Co-op about my employment  
which may include information such as:

- start date of employment with the company
- gross annual income
- hourly wage
- full time/part time/contract employment

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

1 BEDROOM APT	\$ 882.00	2 BEDROOM APT	\$ 1091.00
2 BEDROOM TOWNHOME	\$ 1066.00	3 BEDROOM TOWNHOME STACKED	\$ 1091.00
3 BEDROOM TOWNHOME	\$ 1168.00	3 BEDROOM TOWNHOME (BSMT)	\$ 1250.00
4 BEDROOM TOWNHOME	\$ 1275.00	4 BEDROOM TOWNHOME (BSMT)	\$ 1377.00

Member pays for hydro which includes heat and brings their own washer.

Co-op pays for water and provides a fridge stove and dryer

## THE UNITS AT WESTBOINE PARK HOUSING CO-OP ARE NON SMOKING

<b>Other costs - Westboine Park Housing Co-op</b>	SHARES	\$ 200.00
DAMAGE DEPOSIT	\$ 1200.00	PARKING 1 SPOT \$ 20.00 MONTHLY
EXTRA PARKING SPOT \$ 30.00	MONTHLY HOUSING LIFE INSURANCE	\$ 15.25 MONTHLY

Paper work required **ONLY AFTER DEPOSIT IS PLACED ON UNIT** for Westboine Park Housing Co-op, All paperwork must be submitted within 7 days of placing deposit, or *you will loose the unit and forfeit the \$200.00 deposit*

-CREDIT CHECK FROM EQUIFAX OR TRANS UNION WITH CREDIT SCORE & DETAILS OF CREDIT

-3 CONSECUTIVE PAY SLIPS      -3 MONTHS OF BANKING STATEMENTS

-CERTIFIED TAX PRINT OUT, CALL 1-800-959-8281 TO RECEIVE FROM REVENUE CANADA

**After acceptance** into the Co-op we will ask for

COPY OF VEHICLE REGISTRATIONS

PET REGISTRATION WITH CITY OF WINNIPEG, PROPER VET DOCUMENTS ON PET

PHOTO ID & MANITOBA HEALTH CARD

COPY OF CURRENT HOUSEHOLD CONTENT INSURANCE POLICY IN PLACE PRIOR TO MOVING INTO THE UNIT

ALL INFORMATION REQUIRED MUST BE IN OUR OFFICE 5 BUSINESS DAYS PRIOR TO MOVE IN FAILURE TO DO SO MAY RESULT IN MOVE IN DATE BEING RESHEDULED OR UNIT POSSESION CANCELLED