

FOR OFFICE USE ONLY
Name:
Suite #:
Occupancy Date:
Waiting List:

## **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. Community participation and involvement are what makes a co-op different from other housing options.

#### As a Member of Westboine you have Rights, Benefits, Responsibilities and Obligations

- Purchase of Shares: the required fee for membership.
- Monthly Charges: To pay the housing charges promptly.
- Unit Condition: To maintain your unit in good condition.
- On site Maintenance Staff
- Common Areas: To protect and maintain common areas for everyone's mutual benefit and safety. This includes things such as cutting grass, shoveling snow, etc.
- Shared amenities: Hall, dog park, community garden etc.

- Part of a community: To live peaceably with your neighbors and find co-operative solutions to disagreements.
- Participation: a voting member who contributes to the governance of the co-op by participating 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.
- Security: living in housing that is safe and affordable

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

How many bedrooms?	When would you like to move?			
How did you hear about our Housing Co-op?				
If you were referred by a residen	t/member of Westboine Park, please provide his/her name			
Why did you choose to apply for	residency in our Housing Co-op?			

**Please Note:** All housing charges are collected through a pre-authorized payment plan with your financial institution the first of the month. A late penalty fee of \$ 35.00 will be added to any account after one business late day and a \$50.00 NSF fee is added to an account for any payment returned by your financial institution for any reason. The co-op practices and enforces Fire Safety Regulations by the City of Winnipeg, which may require unscheduled access to your unit.

Applicant #1

Applicant #2

Current Address:  City/Town:  Prov: Postal Code:  Mobile: Work:	Prov:		
Prov: Postal Code:	Prov:		
Mobile: Work:	Mahila	Postal Code:	
	Mobile: Work:		
Other:	Other:		
Email:	Email:		
Date of Birth (MM/DD/YYYY):			
All Other Members of the Household			
Name	Date of Birth (Month/Day/Ye	Dependent ar) (Yes or No)	
CURRENT HOUSING INFORMATION:			
How long have you lived at your current address			
How much do you pay in rent/mortgage paymer f you pay for utilities, how much do you pay eac			
andlord / Mortgage Co. Name & Phone Numbe	r:		
f you have lived there for less than 2 years, ple	ase give previous address a	as well as landlord Name and	
Phone Number.			
Previous Landlord Name:			
Phone Number:			

APPLICANT # 1:				
Current Employe	r Name:		Telephon	e:
Position Held:			How Lo	ong
Salary:	/Week	/Bi-weekly/	/Month/	Year
1 <sup>st</sup> Previous Empl	oyer:			
Position Held:				
APPLICANT #2				
Current Employe	r:		Telephone:	
Position Held:			How Lo	ong
Salary:	/Week	/Bi-weekly/	/Month/	Year
1 <sup>st</sup> Previous Empl	oyer Name:			
Position Held:				
PARKING:				
One parking stal	l is supplied with th	e unit at the cost of \$3	5.00 per month.	
Additional parkin	g stall (if available) a	at the cost of \$ 50.00		
Do you require m	nore than one Parkir	ng Stall? Yes No	second spot is r	not guaranteed
Members are res	sponsible to clean th	neir designated parkin	g stall(s)	
A maximum of 2 townhomes: 20 l	cats or dogs <i>i.e. 2 co</i> bs. in apartment and	strict adherence to the ats or 2 dogs or 1 cat a d stacked units. Only 2	nd 1 dog. Dogs must	not exceed 85 lbs in
guinea pig, etc. n	o reptiles allowed.			
, .	·			
DOG(S): How ma	any:	Breed:	Co	lour:
DOG(S): How ma	any: Weight:			lour: lour:
DOG(S): How ma	any: Weight: Weight:			
DOG(S): How ma Pet Name: Pet Name: CAT(S): How ma	any: Weight: Weight: ny:	Breed:	Co	
Pet Name:  CAT(S): How ma	ny: Weight: Weight: ny: _ Weight:	Breed: Breed:	Co	lour:

DECLARATION

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

I understand that accommodation in Westboine Park Housing Co-op Ltd. depends on being accepted for membership in the Co-op. I also understand that, if the co-op accepts me for membership and offers me a unit, I must make a one-time purchase of shares in the amount of \$200.00 and a \$1,300.00 damage deposit payable 1 week prior to move in date.

After viewing a unit, if you would like to secure the unit, we require a \$200.00 deposit to be paid at that time to secure the for you. **This deposit is non-refundable.** 

Once your application is approved, this \$ 200.00 deposit becomes part of your total financial obligation to the co-op outlined above.

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 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 Winnipe
Signature 1 <sup>st</sup> Applicant		Signature 2 <sup>nd</sup> Applicant	
This application form mu	ıst be signed by all	household members over	18 years of age.

#### **AGREEMENT TO CO-SIGN**

Co-Signer for:		Unit #:	Building #:
Co-Signer Name:		Email Address:	
Mobile Phone #:	Home Phone #:	Wo	ork Phone #:
Current Address:		How lo	ong?
Name of Current Landlor	d:	Current Landlo	ord Phone #:
Previous Address:		How lo	ong?
Previous Landlord:		Previous Landl	ord Phone #:
Current Employer:		Current Emplo	yer Phone #:
Position Held:		Length of Emp	loyment:
Current Work Address: _		Gross Annual I	ncome:
Previous Employer:		Previous Empl	oyer Phone #:
1	, AGREI	E TO PAY ANY A	AND ALL AMOUNTS
	DURING THE TIME OF HIS		
PARK HOUSING CO	O-OP LTD.		
I/We hereby decla	are that the foregoing infor	mation is true	and complete.
	vide WESTBOINE PARK HO		
and personal info	rmation, we also consent to	o a personal inv	estigation into our
information.			
Signed this	day of	20	_ at the City of Winnipeg.
Signature:	W	Vitness.	



#### **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 and stacked units. The pet deposit is \$300.00 per unit

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

Registered Pet Owner:		Unit Number:	
Dog Number 1			
Breed Type:	Estimated Weight:	KG or	LBS Age:
Dog Number 2			
Breed Type:	Estimated Weight:	KG or	LBS Age:
Name and Address of Veterinarian: _			
Applicant 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 ADMINSTRATION 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

Signature- Applicant #1	Signature- Applicant #2
Print Name – Applicant #1	Print Name – Applicant #2
Date:	

# 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 Housi	ng Co-on about my employment which
may include information such as:	is co op about my employment which
<ul> <li>start date of employment with the company</li> <li>gross annual income</li> <li>hourly wage</li> <li>full time/part time/contract employment</li> </ul>	
Date	Print Name
	Signature

# **Participation**

Community participation and involvement are what makes a co-op different from other housing options. Please check off any interest or skills which you have that you would be willing to volunteer for the benefit of the co-op.

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☐ Babysitting	☐ Phoning	☐ Fund Raising	
☐ Kid's Parties	☐ Playground Renewal	☐ Games Night	
☐ Event Planning	☐ Newsletter Committee	☐ Team Sports	
☐ Baking	☐ Pet Sitting	☐ Talent Shows	
☐ Yard Work for Others	☐ Dog Park Maintenance	☐ Exercise Group	
☐ Handy-Person	☐ Library Workgroup	☐ Green Initiatives	
☐ Arts / Crafts	☐ Gardening Workgroup	☐ Other	
For any of the interests that you check	ed above would you say:		
$\hfill\square$ I am interested in participating in the	e activity or activities I have checked		
$\square$ I would like to initiate the activity or	lead a group that has similar interes	ts	
$\square$ I am an expert and could teach othe	rs		
Have you ever served on a committee or a Board? If yes, for what organization and what capacity?			
For members interested in governance (Board of Directors or Committee Members) Westboine Park provides opportunities for the development of skills through training workshops and conferences. Is this something that interests you?			
$\square$ Yes. I would like to know more about the opportunity to get involved in governance.			
Is there a person in your unit that is between the ages of 16 and 30 would be interested in:			
☐ Scholarship (entering post-secondary education or a full-time student currently pursuing a degree)			
☐ Leadership or governance Training			
Name: Ag	2:		
For Office Use Only			
Member Name:	U	nit # Bldg. #	
Telephone#	Email:		