

Application	Form	Office	Use	Only
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File #: _	
Date:	

APPLICATION FOR RESIDENCY AT ELGIN GARDENS

The information you give will be kept confidential.

The Freedom of Information and Protection of Privacy Act covers the collection, use and disclosure of

-	rmation in Baptist I	_						
, ,		First name(s)	,		Date of Birth / /			
Last name	st name First name(s)			Month Day Year Date of Birth / / Month Day Year				
Mailing Addr	ess							
Apt#	Street Address			Street Name				
City			Province		Postal Code			
Contact Infor	mation							
Home Phone		Work Phone			Cell Phone			
Email Address								
Residential A	ddress (complete o	only if differen	it than ma	ailing a	ddress)			
Apt#	Street Address			Street	Name			
City			Province		Postal Code			
B. Current Ac	commodation		l					
Do you:								
1. Rent		nare Expenses	4. Live in a	a Co-Op	T			
Currently monthly rent (not including utilities) \$					Is your monthly rent subsidized? Yes No			
•	vehicle and require pa	rking?						
Υ	'es No							

Elgin Gardens Application 1

Current Land	iloru s C	ontact inior	mation					
Last Name		First Name			Work Phone	Work Phone		
D					•			
			intact Infori	mation (if a		ent address less	than 3 years)	
Apt#	Street	Address			Street Name			
City				Province		Postal Code		
Landlord's Last Name		Landlord's F	Landlord's First Name Wor			ork Phone		
C. Pets								
Do you have a	-	=						
1. Yes	2. No	If yes, w	hat type of	pet(s):				
Do you have a	a dog?							
1. Yes	2. No	If yes, ty	pe or breed	of dog and	l size (weight) of dog:		
D. Income (li Proof of inco				e deductio	ns) fo	r all members o	f your household)	
First Name		1	rce (i.e., employment, EI, pensions, income assistance etc.)		e assistance etc.)	Gross Monthly Income (\$)		
1.							\$	
2.							\$	
3.							\$	
4.							\$	
5.							\$	
7							\$	
8.					Tota	Monthly Income:	\$	
E. Reference	ς.							
Last name	<u>-</u>	F	irst name(s)		Phone	e Number		
Last name		F	irst name(s)		Phone	e Number		
			- \-1					

Elgin Gardens Application 2

(optional)	
G.Declaration	
We declare:	
 This is my/our application and all the information in it is to knowledge. 	rue and complete to the best of my/our
 We permit: Baptist Housing, pursuant to the Freedom of Information any inquiries that are necessary to verify the information Pursuant to the Freedom of Information Act, any person, release to Baptist Housing any information pertinent to the application. 	given in this application. corporation, or social agency may
 Baptist housing may receive and exchange with credit bu credit and other information about me/us to be used in th me/us with rental accommodation. 	• •
 We understand This application does not constitute an agreement on the me/us with rental accommodation. It is my/our responsibility to advise Baptist Housing of any this application and to provide any supporting materials rental accommodation. 	y changes to the information given in
Signed by Applicant	Date:

Submit Application

To: Elgin Gardens c/o 1968 Bee Street Victoria, BC V8R 6P6

Fax: 250-592-7731