

Capital Region Housing Corporation T: 250.388.6422

631 Fisgard Street F: 250.361.4970
Victoria, BC, V8W 1R7 www.crd.bc.ca/crhc

APPLICATION FOR AFFORDABLE ACCOMMODATION (Non-Subsidized)

It is important that you o determine your eligibility	•	• •	form. The info	rmation requ	iested here will t	nelp us to
NAME: (A)		PHONE:				
NAME: (A)			(home)	(cel	l) (other)
NAME: (B)		PHONE:				
NAME: (B)			(home)	(ce	I) (other)
EMAIL:communication regarding	your application.	; Please check	the box 🖵 if yo	u agree to rec	eiving electronic o	documents &
ADDRESS:		CITY:		PO	STAL CODE: _	
ACCOMMODATION REQUIRED – Please note, all applicants must qualify for units based on the operating agreements of individual buildings. Only applicants who meet these terms will be offered a rental unit. Only those families with dependent children, or couples that require an additional bedroom for medical accommodations, qualify for two-bedroom, three-bedroom, four-bedroom or five-bedroom units. Number of bedrooms: Vacancy applying for:						
Do you have any specia	al requirements: If ye	es, please summarize:				
Do you have pets? Yes	•					
PLEASE NOTE:	LEASE NOTE: No dogs are permitted except for Government of BC Certified Service or Guide Dogs. One spayed/neutered indoor cat per household is permitted in designated complexes. No other animals are permitted unless approved by CRHC.					
Number of vehicles:						
PLEASE NOTE:	Some of the Hous	sing Corporation's co	mplexes are i	non-smokin	g.	
HOUSHOLD INFORMA		•	•			
FULL LEGAL		DATE OF BIRTH			RELATION	SHIP TO
(Surname		(day/month/year)	AGE	GENDER	APPLIC	CANT
					APPLICANT	

RESIDENCY HISTORY: Please list your addresses for at least the past **2 years**. CRHC requires two years of favorable Landlord references within the last three years.

ADDRESS	FROM (DATE)	TO (DATE)	LANDLORD'S NAME	LANDLORD'S PHONE NUMBER
		PRESENT		

Have you or any membe	of your household ever	lived in CRHC managed housing? Yes: No	o:
If yes, please list address	s:		
CURRENT ACCOMMODA	ATION		
What is your current month	nly rent or mortgage payme	ent? \$	
Is this a house	Apartment	Number of bedrooms	
Reason for moving from co	urrent accommodation:		

INCOME INFORMATION: List Gross Monthly Income (BEFORE DEDUCTIONS) for all members of your household from all income sources. THREE MONTHS PROOF OF INCOME (for example, employment paystubs, income tax return, letter from employer, government benefits) DATED WITHIN THE PAST 6 MONTHS MUST BE ATTACHED FOR YOUR APPLICATION TO BE PROCESSED. TO QUALIFY FOR HOUSING PLEASE SEE INCOME LEVELS BELOW.

FULL NAME	INCOME SOURCE(S) (include name of employer, EI, pensions, etc.)	GROSS MONTHLY INCOME
		\$
		\$
		\$
		\$
	TOTAL HOUSEHOLD GROSS MONTHLY INCOME	\$

INCOME QUALIFICATION – AFFORDABLE: Annual Income required to qualify for affordable housing. As determined by BC Housing from time to time.

Affordable	Must be above:	Must be below:
Studio	\$50,001	\$82,310
1 bedroom	\$50,001	\$82,310
2 bedroom	\$65,001	\$128,810
3 bedroom	\$82,001	\$128,810
4 bedroom	\$94,501	\$128,810

Before sending in your Application for Accommodation, have	e you:
 Completed your application in full? Indicated the current vacancy you are applying for? Attached verification of your income dated within the Provided a minimum of 2 years residency history in Signed the application in the space below? 	e past 6 months?
	ation without all of the required information pleted.
DECLARATION	
Please read and sign this statement.	
	and complete in every respect to the best of my/our g obtaining credit check, and/or personal reports on me/us from om public sources such as Court Services Online and police
I/We hereby authorize agencies or individuals to provide whassessment of the application.	natever information they have to the Corporation relative to
I/We understand this application does not constitute an agreental housing.	eement on the part of the Corporation to provide me/us with
Signed	
Signed	_ Date
Reviewed byCapital Region Housing Corporation	_ Date

This form collects personal information in accordance with section 26(c) of the BC *Freedom of Information and Protection of Privacy Act* for the purposes of determining your eligibility and assessing your housing needs. Please contact Senior Manager, Capital Region Housing Corporation, Box 1000, 625 Fisgard Street, Victoria, BC V8W 1R7, tel:250.388.6422 if you have inquiries about the collection or use of this information.

PLEASE NOTE THAT ONLY SUCCESSFUL APPLICANTS WILL BE CONTACTED. ALL ADDITIONAL APPLICATIONS WILL BE SECURELY DESTROYED.

Updated July 10, 2024