



**Application to Become a Housing Partner  
Habitat for Humanity Kamloops**

Suite 28-1425 Cariboo Place  
Kamloops, BC V2C 5Z3

Tel (250) 314-6783 Fax: (250) 374-9370 Email: familyservices@habitatkamloops.ca

*If you have any questions about how to fill out this form, please call the Habitat office and ask for our Family Services Manager. Please allow 6-8 weeks for processing. Because of the high volume of applications, we will contact only the successful applicants.*

***Applications are not currently being accepted. Please watch our website for our next intake of families. Thank you for your interest.***

1. APPLICANT INFORMATION	
APPLICANT	CO-APPLICANT (if applicable)
Applicant's name	Co-Applicant's name
Home Phone	Home Phone
Social Insurance Number	Social Insurance Number
Date of Birth (dd/mm/yy)	Date of Birth (dd/mm/yy)
Marital Status:    Married    Separated Unmarried    Other	Marital Status:    Married    Separated Unmarried    Other
Current Household Members (people who live with you not listed by the co-applicant) Name _____	Other Household Members (people who live with you not listed by the applicant) Name _____
Date of Birth _____	Date of Birth _____
Male      Female	Male      Female
Name _____	Name _____
Date of Birth: _____	Date of Birth _____
Male      Female	Male      Female
Email	Email

**2. CURRENT ADDRESS & PROPERTY INFORMATION**

Present Address (street, city, province, postal code)

Present Address (street, city, province, postal code if different from the applicant)

Number of years at this address

Number of years at this address

If living at present address less than three years, please complete the following:

Previous Address

Previous Address

Number of years at that address

Number of years at that address

If you own your residence:-

Monthly payment \$ \_\_\_\_\_

Unpaid Balance \$ \_\_\_\_\_

Do you own any other real estate?  
If yes, please describe including location

No      Yes

Is there a mortgage on the real estate?  
If yes: Monthly payment \$ \_\_\_\_\_

No      Yes  
Unpaid Balance \$ \_\_\_\_\_

If you rent:-

Monthly payment \$ \_\_\_\_\_

\*\*Please supply a copy of your lease, a recent rent receipt, or cancelled rent cheque)

Please fill out the following information about your current landlord:

Landlord's Name

Phone #

Address

**3. PRESENT HOUSING CONDITIONS**

How many bedrooms do you have now? (please circle) **1** **2** **3** **4** **5**

Please check other rooms that you have in your home:

Kitchen  Bathroom  Living Room  Dining Room  Basement

Others (please describe) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In the space below, please describe the condition of the home you live in. If you need more space, please attach a separate piece of paper.

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

How is your current housing situation not meeting your needs?

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

Are there special needs that you would consider in choosing or building a house (for example wheelchair accessibility, room for grandparents etc.)

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

#### 4. EMPLOYMENT INFORMATION

Please supply your work history for the past 3 years, and a copy of your most recent pay stub

##### APPLICANT

Current Employer(s):

Address:

Phone number:

Employment Position:

Part-time \_\_\_\_\_ hrs/wk

Full-time \_\_\_\_\_ hrs/wk

Years on job \_\_\_\_\_

##### CO-APPLICANT

Current Employer(s):

Address:

Phone number:

Employment Position:

Part-time \_\_\_\_\_ hrs/wk

Full-time \_\_\_\_\_ hrs/wk

Years on job \_\_\_\_\_

##### APPLICANT

Previous Employer:

Address:

Phone number:

Employment Position:

Part-time \_\_\_\_\_ hrs/wk

Full-time \_\_\_\_\_ hrs/wk

Years on job \_\_\_\_\_

##### CO-APPLICANT

Previous Employer:

Address:

Phone number:

Employment Position:

Part-time \_\_\_\_\_ hrs/wk

Full-time \_\_\_\_\_ hrs/wk

Years on job \_\_\_\_\_

For any other household member, over 18 years of age and not attending full-time school, with income please complete the section below.

Name of Household Member

Current Employer(s):

Address:

Phone number:

Employment Position:

Part-time \_\_\_\_\_ hrs/wk

Full-time \_\_\_\_\_ hrs/wk

Years on job \_\_\_\_\_

Name of Household Member

Current Employer(s):

Address:

Phone number:

Employment Position:

Part-time \_\_\_\_\_ hrs/wk

Full-time \_\_\_\_\_ hrs/wk

Years on job \_\_\_\_\_

### 5. MONTHLY INCOME & TOTALS

Please fill out the table below with the total monthly income (before taxes) for each non-student, household member 18years & over. All blanks on this page must be completed. If the blank does not apply, please print N/A (not applicable)

Monthly Income	Applicant	Co-Applicant	Other Members (18 & over) in Household
Monthly Income Before Tax- Current Job	\$	\$	\$
Monthly Income Before Tax- Current Job	\$	\$	\$
Monthly Social Assistance Monthly Income	\$	\$	\$
Monthly Old Age Security	\$	\$	\$
Monthly C.P.P.	\$	\$	\$
Monthly Pension	\$	\$	4
Monthly Disability Pension	\$	\$	\$
Monthly Employment Insurance	\$	\$	\$
Monthly Child Support	\$	\$	\$
Monthly Child Tax Benefit	\$	\$	\$
Monthly Childcare Supp.	\$	\$	\$
GST Rebate	\$	\$	\$
Monthly Spousal Support	\$	\$	\$
Other Income (attach written explanation of this income)	\$	\$	\$
<b>Total Monthly Income</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

## 6. MONTHLY EXPENSES & TOTALS

Please fill out the table below with all of your monthly household expenses.

Monthly Expenses	Applicant	Co-Applicant	Other Members in Household - 18 years or over
Monthly Rent	\$	\$	\$
Monthly Mortgage and Taxes (if applicable)	\$	\$	\$
Monthly Heating	\$	\$	\$
Monthly House Insurance	\$	\$	\$
Monthly Utilities (Telephone, Hydro, Cable)	\$	\$	\$
Other Monthly Insurance (Life, Car etc)	\$	\$	\$
Child Care	\$	\$	\$
Monthly Credit Card Payments	\$	\$	\$
Monthly Personal Loan Payment	\$	\$	\$
Monthly Student Loan Payment	\$	\$	\$
Monthly Car Payments	\$	\$	\$
Monthly Spousal/Child Support Payments	\$	\$	\$
Other	\$	\$	\$
<b>Total Monthly Payments</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

## 7. ASSETS

List All Chequing, Savings, Investment Accounts, RRSP etc.

Applicant	Co-Applicant
<p>Name of Bank: _____</p> <p>Address: _____</p> <p>Phone Number: _____</p> <p>Account Type            Chequing _____ Savings _____ RRSP _____            GIC _____ Mutual Fund _____ Other _____</p> <p>Account Number: _____</p> <p>Balance: \$ _____</p>	<p>Name of Bank: _____</p> <p>Address: _____</p> <p>Phone Number: _____</p> <p>Account Type            Chequing _____ Savings _____ RRSP _____            GIC _____ Mutual Fund _____ Other _____</p> <p>Account Number: _____</p> <p>Balance: \$ _____</p>
<p>Name of Bank: _____</p> <p>Address: _____</p> <p>Phone Number: _____</p> <p>Account Type            Chequing _____ Savings _____ RRSP _____            GIC _____ Mutual Fund _____ Other _____</p> <p>Account Number: _____</p> <p>Balance: \$ _____</p>	<p>Name of Bank: _____</p> <p>Address: _____</p> <p>Phone Number: _____</p> <p>Account Type            Chequing _____ Savings _____ RRSP _____            GIC _____ Mutual Fund _____ Other _____</p> <p>Account Number: _____</p> <p>Balance: \$ _____</p>
<p>Other RRSP, RESP, Investments</p>	<p>Other RRSP, RESP, Investments</p>
<p>Please attach a separate sheet for additional accounts.</p>	
<p>Do you own a Vehicle? Yes or No</p> <p>Please include details:</p> <p>Car (#1)            Make and Year            _____</p> <p>Car (#2)            Make and Year            _____</p>	<p>Do you own a Vehicle? Yes or No</p> <p>Please include details:</p> <p>Car (#1)            Make and Year            _____</p> <p>Car (#2)            Make and Year            _____</p>
<p>Other: (travel trailer, skidoo etc)</p>	



## 8. LONGTERM DEBT

Please include all loans, credit cards, lines of credit, and debts owing. If you need more space, please attach a separate sheet

APPLICANT	CO-APPLICANT
Name of Lender/Credit Card: _____ Account Number: _____ Balance \$ _____ Monthly Payment \$ _____ Months left to pay: _____	Name of Lender/Credit Card: _____ Account Number: _____ Balance \$ _____ Monthly Payment \$ _____ Months left to pay: _____
Name of Lender/Credit Card: _____ Account Number: _____ Balance \$ _____ Monthly Payment \$ _____ Months left to pay: _____	Name of Lender/Credit Card: _____ Account Number: _____ Balance \$ _____ Monthly Payment \$ _____ Months left to pay: _____
Name of Lender/Credit Card: _____ Account Number: _____ Balance \$ _____ Monthly Payment \$ _____ Months left to pay: _____	Name of Lender/Credit Card: _____ Account Number: _____ Balance \$ _____ Monthly Payment \$ _____ Months left to pay: _____
Other (personal loans, student loans, etc): _____	Other (personal loans, student loans, etc): _____

Total Balance owing on Debt from all sources: (please add above balances)  
TOTAL = \$ \_\_\_\_\_

## 9. WILLINGNESS TO PARTNER

To be considered for a Habitat home, you and your family must be willing to complete a minimum of 500 hours of volunteer service to Habitat for Humanity Kamloops prior to moving into your home. Your help in building your home and the homes of others is called "Sweat Equity", and may include helping with construction, working in the office, the ReStore, or other approved activities. This is voluntary service that has no monetary compensation to you or any member of your family.

I AM WILLING TO COMPLETE THE REQUIRED SWEAT EQUITY HOURS

Please answer Yes or No

Applicant \_\_\_\_\_

Co-Applicant \_\_\_\_\_

## 10. DECLARATIONS

Answering "yes" to these questions does not disqualify you. If you answered yes, please explain on a separate sheet of paper and attach it to this application.

Please Circle the Answers to the Following Questions:	Applicant	Co-Applicant
1. Do you have any debt because of a court decision against you?	<b>Yes No</b>	<b>Yes No</b>
2. Are you currently involved in a lawsuit?	<b>Yes No</b>	<b>Yes No</b>
3. If you have declared bankruptcy, have you been discharged from bankruptcy within the past 3 years? (if yes please include the date of release and documentation)	<b>Yes No</b>	<b>Yes No</b>
4. Are you a Canadian citizen or a permanent resident of Kamloops for one year?	<b>Yes No</b>	<b>Yes No</b>

## 11. REFERENCES

Please list three people who have known you personally for at least 2 years but are not related to you. Please notify references before using their name.

Name	Address	Phone	Relationship
1)			
2)			
3)			

## 12. AUTHORIZATION & RELEASE

**The undersigned declare(s) that the statements made in this application are true and correct.**

I/we, the applicant(s), consent to any inquiries by Habitat for Humanity Kamloops deemed necessary to reach a decision on this application, including contacting references. I/we consent to the disclosure at any time of any credit information about me/us by any credit reporting agency or by anyone with whom we have financial relations.

I/we understand the Habitat for Humanity Kamloops is using this information to assess my qualifications for a Habitat home and that the evaluation may also include personal visits, credit checks, financial review with budget analysis, and employment verification.

I/we further certify that I/we have answered all the questions truthfully and to the best of my/our knowledge. We understand that if we have not answered the questions truthfully, this application may be denied, and that even if we have already been selected to receive a Habitat home, I may be disqualified from the program.

Applicant's Signature

\_\_\_\_\_

Date \_\_\_\_\_

Print name \_\_\_\_\_

Co-Applicant's Signature

\_\_\_\_\_

Date \_\_\_\_\_

Print name \_\_\_\_\_

PLEASE USE THE FOLLOWING SHEET TO ENSURE THAT YOU PROVIDE ALL  
SUPPORTING DOCUMENTATION.

**THE FOLLOWING DOCUMENTS MUST BE INCLUDED FOR THE APPLICANT, CO-APPLICANT AND HOUSEHOLD MEMBERS. Please provide photocopies – no originals**

	Applicant	Co-Applicant	Other
Proof of eligibility to reside and work in Canada - <i>Canadian citizenship or Canadian birth certificate or landed immigrant papers</i>			
Rental Information - <i>Copy of your lease or cancelled rent cheque</i>			
Your most recent Notice of Assessment from Canada Revenue Agency			
Most recent pay stub			
If you have changed jobs this year, please provide a copy of your last pay stub from your previous employers			
Assessment Notice – Child Tax Benefit			
Statement of provincial childcare supplements			
Statement of Disability Income			
Statement of Social Assistance Income			
Statement of C.P.P. Income			
Statement of O.A.S. Income			
Statement of other pension income			
GST Rebate			
Other income			
Statements of amounts owing on your credit cards			
Loan statements			
Bankruptcy Discharge papers			
Copy of Child Support and/or Spousal Support Income or Payments			

\*\*Additional documents may be required.