



Splatsin Housing Department

5775 Old Vernon Rd Ph: 250-838-6496 Ext: 815
Enderby, B.C. V0E 1V0 Fax: 250-838-2131

“We are Splatsinaca (people), members of the Secwepemc Nation, prospering from the wealth of our territories, following in the footprints of our ancestors for those yet unborn”

Application for Splatsin Rental Housing

Who is eligible to receive housing?

- Applicants must be 19 years or older and be a member of Splatsin.
- Applicants will be required to provide verification of household income in order to confirm their ability to manage the monthly rental payments and other associated costs and/or charges.
- Applicants are required to sign a financial disclosure form authorizing the Splatsin Indian Band to verify income, credit history, etc.

Who is not eligible?

- Any applicant that owns their own home will not be eligible and your application will not be accepted.
- Any applicant with **RENTAL ARREARS AND/OR OUTSTANDING ACCOUNTS** owing with Splatsin will not be considered until the outstanding accounts are paid in full.
- Applicants that have a history of poor tenancy (cited for rental agreement violations where notice to correct or vacate was issued) except where 5 years has passed, and applicant has documentation that confirms compliance with a rental agreement for a 2-year period.
- Applicants can appeal their eligibility by requesting a meeting with the Housing Committee at the next duly convened meeting. Requests to be added to the Splatsin Housing Committee agenda are to be made through the Splatsin Housing Officer.

Where to send the completed application:

- In-person at the Splatsin Housing Department Office 250-838-6496 Ext.815
- By mail to the Splatsin Housing Department, P.O Box 460, Enderby, BC V0E 1V0
- By email to housing_clerk@splatsin.ca

Please be sure that **all the information requested in the application is provided** – if it is not, the application will be returned to you at the address noted on the next page.

How will you be notified about the status of your application?

The Splatsin Housing department will Contact the applicant when a suitable rental unit becomes vacant within 1 year of application date.

- a) If your application is complete, it will remain on file for 1 year. However, the Splatsin Housing Department strongly encourages applicants to re-apply every 6 months.
- b) If the application is incomplete/ineligible, the application will be returned along with details on the reason for return and/or information required.

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1. **Do you Own a Home?** Yes No If yes, you are not eligible for rental housing.

2. **Contact Information.**

Primary Occupant	Home phone #	Work phone #	Cell phone #
Secondary Occupant			

3. **Information On Your Current and Previous Residence**

If you are currently renting , please provide information on your current and last 2 residences				
Current address	From Date	To Date	Name of Landlord	Phone number for landlord
Previous Address 1	From Date	To Date	Name of Landlord	Phone number for landlord
Previous Address 2	From Date	To Date	Name of Landlord	Phone number for landlord

How many bedrooms do you need?	
Have you or anyone in your household received housing assistance from Splatsin (please check one)?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Do you have pets? I.E. Dogs, Cats, Birds	Yes <input type="checkbox"/> No <input type="checkbox"/>
IF YES , how many and what kind?	

4. **Proof Of Income (Please the ones that apply to you and attach all required paperwork)**

<input type="checkbox"/>	T4, Current Paystubs or Letter from Employer
<input type="checkbox"/>	Pension, Canada Pension Plan (CPP), or Old Age Security (OAS)
<input type="checkbox"/>	Disability
<input type="checkbox"/>	Child Tax
<input type="checkbox"/>	Self Employed
<input type="checkbox"/>	Other: EI, WCB, or any other Settlements

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5. Financial and Other Information Disclosure

I/we are applying for housing offered by Splatsin. I authorize Splatsin to receive a reference check and previous landlords about me/us to be used in the assessment of eligibility for this housing application.

Primary occupant name (please print)	
Signed	Date:
Social Insurance Number	Status Number

Secondary occupant name (please print)	
Signed	Date:
Social Insurance Number	Status Number

Please Note: A Copy of Your Current Banking Information and Picture ID Is Also Required

For assistance or question on completing this form, please contact the
Housing Department at 250-838-6496 ext 815