



Tantalus Manor Location:

1098 Wilson Crescent Squamish, BC V8B 0M4

40 Units: a mix of 4 Studios, 6 One Bedroom, 27 Two Bedrooms, and 3 Three Bedrooms.

Purpose of this Form

This form collects personal information in accordance with section 26(c) of the Freedom Information and Protection of Privacy Act.

Your personal information is collected for the following purposes, and Hiyám Housing will use your information to:

- Determine eligibility;
- Assess housing needs; and
- To see if this type of housing is suitable to your needs.

Other Important Information

Applicants who are offered and accept a unit will be asked to sign a tenancy agreement that covers topics such as parking, crime-free housing, etc. Smoking and pets are not allowed.

Partnership

Hiyam Housing and Housing Squamish are co-owners of this building. Housing Squamish manages these homes on behalf of the partnership.

Purpose

The purpose of this application is to create a waitlist for Tantalus Manor. Once units become available this list will be used to fill the vacancies.

Eligibility

These homes are prioritized for:

- 1. Squamish Nation People who live in the Squamish Valley area
- 2. Squamish Nation People
- **3.** Non-Squamish Nation People who work for Squamish Nation, Hiyam, Nch'kay

Tenants must meet income and asset requirements.

If Hiyam cannot find a suitable tenant, then it will revert to Housing Squamish to advertise the unit within their policy and practices.

How much is the Rent?

2025 rents by unit type are:

Unit Type	Rent			
Studio	\$1,021			
1-Bed	\$1,357			
2-Bed	\$1,772			
3-Bed	\$2,169			

These rents are subject to annual increases in compliance with the Residential Tenancy Act.

A half-month damage deposit, references, and a one-year lease are required.

How to submit your application:

- **In person** during office hours at 336 West 4th, North Vancouver or
- By email: applications@hiyamhousing.com or
- **By regular mail:** 336 West 4th Street, North Vancouver, BC V7M 1J1

If you need help filling out the form:

Phone 604-210-9126 and make an appointment to meet with a staff member, or we can answer your question over the phone.





Please Print Clearly

Hiyám Housing: FOR OFFICE USE ONLY
Date and Time Received:

ase i inic cicai	·y		Date and Time Received:				
. Are you a Squ	uamish Natior	Person or	Caring for a Squam	nish Nation	Child?		
□ No □ Yes St	tatus Number:						
. Applicant Inf	ormation:						
irst Applicant:							
ast Name		First Name	(s)		Alias or	Nickname ((Optional)
Birth Date (dd/mm	л/уууу)		Identified Gende	r			
Jnit:			Street:				
City:		Postal Code:					
Phone:		Email:	Email:				
Second Applican	t:						
_ast Name		First Name	(s)		Alias or	Nickname ((Optional)
Birth Date (dd/mm	л/уууу)	<u>I</u>	Identified Gende	r			
Jnit:			Street:				
City:			Postal Code:				
Phone:			Email:				
6. Household Ir	ntormation – f	amily mem	bers who will be liv	/ing with yo	ou.		
Name	Status	S Number	Relationship (to the applicant)	Birth Date (dd/mm/		Age	Identified Gendered
1.			SELF				
2.							
3.							
4.							
5.							





4. Residency History.

Supervisor Name:

Previous Employer:

Previous Supervisor Name:

Please provide information on where you have lived for the last five years.

Information collected will be used for reference checks.

Rental Address (street, city)	From Date	To Date	Landlord	Landlord Phone	Relationship
	(dd/mm/yyyy)	(dd/mm/yyyy)	Name	#	to you
5. Current Living Situation	1				
Do you: ☐ Rent ☐ Own ☐	Other				
How much is your monthly re	nt· ¢				
, ,		_			
Check all of the following	that apply:				
☐ I live in a self-contain	ned unit		e with family o		
(apartment, house, t	•	•	er than spouse	/common-law partne	er)
□Other (describe)		□ I rer	nt a room, hav	e roommates, and sh	nare the
		expe	nses		
6. Income					
6a. What is your household m	onthly income? Dle	ase fill out the helo	w and tell us al	nout the monthly inco	ome hefore taves
•	•			•	
for all residents over the a	age of 18. Add addit	ional pages if more	than two appli	cants over the age of	18.
		First Applicant	t		
Employer:	Position:		Moi	nthly Income:	

Supervisor Phone No.:

Previous Supervisor Phone No.:

Position:

Length of Employment:

Length of Employment:

Monthly Income:





	Second Applican	t		
Employer:	Position:		Monthly Income	e:
Supervisor Name:	Supervisor Phone No.:		Length of Empl	oyment:
Previous Employer:	Previous Employer: Position:			e:
Previous Supervisor Name: Previous Supervisor Phone No			Length of Empl	oyment:
6b. Does any member of your hou If yes, identify which household			pt income?] Yes □ No
(Tax-exempt income includes income	earned on-reserve i.e. employme	ent, empl	loyment insuranc	ce, private disability, etc.)
6c. Income/Payment Type for all household members over the age of 18 (add additional pages for more than two household members over the age of 18)			nthly Gross Income fore taxes)	Second Applicant Monthly Gross Income (before taxes)
Support payments (family, spousal) Child Support (do not include Canada Child Benefits or Universal Child Care Subsidy)				(
Employment Income				
Employment Insurance Income				
Income Assistance				
Worker Compensation Board				
Student Living Allowance				
Pension				
Foreign Income				
Other (describe i.e. Seasonal, etc.)				
6d. What is the combined month				





7. Asset Information

7a. Canadian and Foreign Finances: You <u>must</u> answer yes or no in the declaration for each line listed below.

(add additional pages for more than two household members over the age of 18)

Type of Accets (industry all	Do you holdany of this asset?		Bank, financial	Total Value (\$)		
Type of Assets (including all bank accounts, even with negative balances)			institution, or company name	Applicant	Household	
Chequing and Savings account(s)	□ Yes	□ No				
Stocks, GIC's, Term Deposits	□ Yes	□ No				
RRSP/RESP/RSP/RDSP	□ Yes	□ No				
Trust Funds	□ Yes	□ No				
Bonds/Other Shares/Foreign Funds	□ Yes	□ No				
Other Assets including Cash	□ Yes	□ No				
Other	□ Yes	□ No				
Shares in a company or business*	□ Yes	□ No				
*If you own shares in a company or business provide legal name:						

7b. Do you, or anyone in your household over the age of 18, own any Canadian or Foreign property
(e.g. house, cottage, townhouse, condominium, land, commercial property, etc.)

П	Yes	П	Nο

If yes, please provide the following information:

Type of Property	Location (Address)	Year Purchased	Value (\$)	Equity (\$)

Note: Proof of assets are not required at time of application but may be required at a later date.





PLEASE READ AND SIGN

D

D	ecla	ration and Consent						
I/	We D	eclare:						
		This is my/our application; an	d					
		That the information provided will result in cancellation of the		e that any false information provided				
_		It is my/our responsibility to i	nform Hiyám Housing if the contact i	nformation on our application changes.				
I/	We A	uthorize:						
		Hiyám Housing and Housing this application, including tha	Squamish to make any necessary inqu t of Squamish Nation.	uiries to verify the information given in				
		information pertinent to the a	ocial agency to release to Hiyám Hou assessment of my/our application.					
				ith my/our previous landlord's payment the decision-making process to provide				
I /	We U	nderstand:						
		This application is not an agr me/us with housing.	eement by Hiyám Housing and Housi	ng Squamish or its members to provide				
		That if, I/we are being considered for an available unit, Hiyám Housing and Housing Squamish will gather additional information to assess my/our ability to uphold the obligations of a tenancy agreement, and it is my/our responsibility to provide or cause to be provided the information requested to assist with this assessment.						
		It is my/our responsibility to tell Hiyám Housing of any changes to the information given in this application and to provide any supporting materials required.						
		That false information given by me/us may result in my/our application being canceled from consideration.						
		□ I agree that the rental unit will be my primary residence once I move in.						
		☐ If I wish to withdraw from this Declaration and Consent, I may contact Hiyám Housing; however, the withdrawal will result in my no longer being considered for housing.						
		I will be required to provide a	a copy of my status card.					
	Applica	ant Name (Print)	Applicant Signature	Date				
	Co-App	olicant (Print)	Co-Applicant Signature	Date				

Purpose of this form:

Personal information is collected on this form to identify and contact you, assess your eligibility for supportive housing, and determine the accommodation that meets your needs. The data is collected by section 26(c) of the Freedom of Information and Protection of Privacy Act. If you have any questions about your personal information, please call or write to 604-210-9126.





This application is only for Tantalus Manor

Please do not use this application form to apply for other properties under Hiyám Housing. Visit our website, www.hiyamhousing.com, for information on our other properties, their criteria, and the application process.

Before you hand in your application form, please make sure to:

- Answer all questions to the best of your ability.
- Clearly print if you are filling your form in by hand.
- Give us a mailing address or email address so we can send you a "Letter of Confirmation."
- Sign the application.

What to expect after you submit your application:

- 1. You will receive confirmation that we have received your application.
- 2. If Hiyam Housing needs more information on your housing application, we will contact you by mail, email, or phone.

Reminder: If you need assistance filling out the application or have questions, please get in touch with us at 604-210-9126 or you can come into our office.