

Please list reason for wanting to move from present accommodations.

I, declare the information to be correct. I understand that this application does not constitute an agreement on the part of Cress Housing Corporation or its agents to provide me with rental accommodations. I acknowledge that this application becomes the property of Cress Housing Corporation, or its agents prior to the execution and delivery to me of a lease hereby applied for, to withdraw, revoke, or cancel without penalty of liability for damage or otherwise any acceptance or approval of this application previously made or given. I, HEREBY AUTHORIZE YOU TO MAKE ANY INQUIRIES YOU DEEM TO VERIFY THE ABOVE FACTS.

Signature of Applicant

Date

Please remember, that once you have applied, we require:

Written landlord references:

Please provide **two** written landlord references. One from your current landlord and one from your previous landlord.

Application for medical reasons:

Describe any physical disability or health problem(s) of any household member(s). Please provide medical documentation indicating illness and/or disability.

Please provide verification of your income:

1. Cheque stub showing your gross monthly earnings, pensions, etc.
2. Letter verifying amount in student allowance (band funding).

Please note:

It is your responsibility to keep our office updated of any changes on your application: address, phone number, family size, income, etc.

**Application for
Rental Accommodations**

Cress Housing Corporation

**300-203 Packham Avenue
Saskatoon, SK
S7N 4K5**

Phone: (306) 244-7747

Fax: (306) 244-2444

Mission Statement

To provide affordable housing for First Nations persons in the City of Saskatoon and to develop other strategies including home ownership as potential solutions in addressing the housing shortage facing the urban First Nations community.



Please note that all areas of this application must be completed or it won't be processed. If a section does not apply to you, mark N/A.

Personal Data:

Surname: _____

First Name: _____

Address: _____

City: _____

Postal Code: _____

Phone Number: _____

Email Address: _____

First Nations Band: _____

Treaty number: _____

DOB: _____ Sex: _____

What is your source of income?

Band funding: \$ _____

Student loan: \$ _____

OAS/CPP: \$ _____

Social Assistance: \$ _____

Employment: \$ _____

EI: \$ _____

Disability: \$ _____

Other: \$ _____

List below names of all persons that will be living with you. **Persons 18 years or over must indicate source of income.** This includes your children or any dependants and anyone over 18 years.

Co-Applicant(s):

Name: _____

DOB: _____ Sex: _____ Relationship: _____

Income source: _____ Amt: _____

First Nation Band and Treaty Number: _____

Name: _____

DOB: _____ Sex: _____ Relationship: _____

Income source: _____ Amt: _____

First Nation Band and Treaty Number: _____

Dependant(s):

Name: _____

Age: _____ Sex: _____ Relationship: _____

Is baby expected? Yes No
If yes, please indicate due date: _____

Current Living Arrangements:

House Apartment/Suite Duplex
Staying with relatives Homeless

The rent is \$ _____

Are you able to provide landlord reference(s)? If no, please explain: _____

If yes, please give information of:

Present landlord: _____

Phone: _____

Duration: _____

Former landlord: _____

Phone: _____

Duration: _____

Employment:

Present Employer: _____

Length of service: _____

Phone: _____

Spouse's Employer: _____

Length of service: _____

Next of Kin:

Name : _____

Relationship: _____

Contact Phone Number: _____



CRESS HOUSING CORPORATION

ASIMAKANISEEKAN ASKIY RESERVE #102A

300 - 203 Packham Avenue
Saskatoon, Saskatchewan S7N 4K5
Phone (306) 244-7747 Fax (306) 244-2444

LANDLORD REFERENCE FORM FOR CRESS HOUSING CORP.

This form is to be **COMPLETED BY THE PERSON OF WHOM YOU ARE ASKING A REFERENCE FROM**. It cannot be filled out by the person applying to Cress Housing.

Landlord reference for: _____
(Name of applicant's name – Please print)

Reference from: Present Landlord Former Landlord

Tenants address: _____

Does rent include: Heat? Water? Power? Other _____

Move in date: M ____ D ____ Y ____ / **Move out date:** M ____ D ____ Y ____

Current rent outstanding?: No Yes ► **How much?** \$ _____

Has tenant given notice to vacate? No Yes **Eviction notice served?** No Yes

Rent history: Pays consistently on or before the 1st of month
Pays usually on or before the 1st of the month
Pays usually on or before the 7th of the month
Pays usually before the 15th of the month
Pays usually on the 20th of the month
Tenant calls to make/discuss late payment arrangements when necessary
#____ of late rent notices on file

Unit Care (Maintenance): Excellent; Good; Fair; Poor; Unknown

Yard Care (Maintenance): Good; Fair; Poor; Not Required

Breaches to Lease Agreement: Illegal pet on premises
Border/roommate not on Lease Agreement
Non declaration of income
Noise/Disturbance/Illegal activity
Request tenant to clean or repair damage
Utilities disconnection due to non payment

Reason for vacating: _____

Print Name (Landlord): _____

Signature (Landlord): _____

Phone number: _____ **Cell number:** _____

Email address: _____