

# SANDPIPER HOUSING CO-OPERATIVE: APPLICATION

DATE: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Birthdate (Month/Day/Year) \_\_\_\_\_

Current Address \_\_\_\_\_

HOME PHONE # \_\_\_\_\_ WORK # \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

Name of Co-applicant \_\_\_\_\_

Birthdate (Month/Day/Year) \_\_\_\_\_

Current Address \_\_\_\_\_

HOME PHONE # \_\_\_\_\_ OTHER \_\_\_\_\_

List all other persons who will be residing in this Unit with you.

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Relationship \_\_\_\_\_

## **The Co-op only allows for 1 PET:**

Do you have any pets?? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, how many?? \_\_\_\_\_ What Type \_\_\_\_\_

## HOUSING REQUIREMENTS (PLEASE CHECK ONE)

UNIT SIZE: 2 BEDROOM \_\_\_\_\_ 3 BEDROOM \_\_\_\_\_ 4 BEDROOM \_\_\_\_\_

Are you interested in a Wheelchair accessible - single level 2 bedroom unit? Yes / No

Have you previously lived in a CO-OP? If yes, when and where?

(Please provide details of your experience, include any available Co-Op references).

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**RESIDENCY HISTORY** – Please list your address(es) for the past 3 years.

Address \_\_\_\_\_

How long? \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Landlord:

\_\_\_\_\_ Phone \_\_\_\_\_

Do you currently Rent \_\_\_\_\_ Own \_\_\_\_\_ Share \_\_\_\_\_ Co-op \_\_\_\_\_

Current monthly Rent Charge \$ \_\_\_\_\_

Previous Address \_\_\_\_\_

How long? \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Landlord:

\_\_\_\_\_ Phone \_\_\_\_\_

Previous Address \_\_\_\_\_

How long? \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Landlord:

\_\_\_\_\_ Phone \_\_\_\_\_

Please submit up to 2 Personal References:

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# SANDPIPER HOUSING CO-OPERATIVE: APPLICATION

IT IS MANDATORY FOR CO-OP MEMBERS TO PARTICIPATE IN THE OPERATION AND MANAGEMENT OF THE CO-OP. PLEASE INDICATE YOUR AREAS OF INTEREST:

MAINTENANCE \_\_\_\_\_ PARTICIPATION \_\_\_\_\_ BOARD \_\_\_\_\_  
LANDSCAPING \_\_\_\_\_ MEMBERSHIP \_\_\_\_\_ FINANCE \_\_\_\_\_

Please list what skills you and your co-applicant can contribute to the Co-Op.

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What does participation mean to you?

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Co-Op living is about volunteering and participating, how much time can you donate to the co-op?  
In hours per month.

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In our co-op physical labor is required, do you have any disabilities that would stop you from participating physically in this area?

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Volunteer Experience (committees, organizations, school etc.)

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# SANDPIPER HOUSING CO-OPERATIVE: APPLICATION

I, \_\_\_\_\_ authorize the investigation of all information contained in this application.  
( Applicant )

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please forward completed and signed applications to:

Sandpiper Housing Co-Operative

Unit # 51 - 12158 82 Avenue

Surrey BC V3W 3E3

**Applications may also be left in the black mail box at the door of unit # 51**

## **Additional Information:**

At the time of your first interview a \$35 non-refundable processing fee for credit checks will be requested in cheque form, made out to: Sandpiper Housing Co-Operative. Applicants must submit a completed application prior to consideration for membership. Incomplete applications will not be accepted.

Applications will remain on the Sandpiper Housing Co-Operative waiting list for 6 months. It is the applicants' responsibility to notify the Co-Op every 6 months if you wish to remain on the waiting list; otherwise you will be removed from the waiting list.

Please direct any inquiries to: **sandpipercoop@hotmail.com**

Visit us on our Website for more Information and Pictures:

<http://www.sandpipercooperative.ca/>

**www.sandpipercooperative.ca**

# SANDPIPER HOUSING CO-OPERATIVE: APPLICATION

## Income Verification

The following information is required in order for us to maintain the financial viability of the Co-op. **This information is not seen by the Membership Committee members.**

Please provide us with the GROSS annual income of all persons over the age of 19 who will be residing in this unit.

Name	Employer/Source of Income	Phone	Gross Income
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Current monthly rent or mortgage payment \_\_\_\_\_

Current Landlord/Mortgage Name and Phone \_\_\_\_\_

\_\_\_\_\_

Is there any other information that you feel we should be aware of regarding your income verification?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I understand that a credit check will be conducted and I authorize the verification and investigation of all information submitted on this application. I/We confirm that the information is accurate and authorize Sandpiper Housing Co-operative to obtain such credit reports and other information deemed necessary in connection with the establishment and maintenance of a society membership account.

Consent if given pursuant to section 12 of the Personal Information reporting Act, S.B.C. 1973.

\_\_\_\_\_

Name

Signature

\_\_\_\_\_

\_\_\_\_\_

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