



Nak'azdli Whut'en Housing Application

RENTAL HOUSING

**ALL INFORMATION MUST BE COMPLETED IN FULL
BEFORE THIS WILL BE PRESENTED TO HOUSING COMMITTEE
ALL INCOMPLETE FORMS WILL BE RETURNED TO APPLICANT TO COMPLETE.**

Name of Applicant: _____ Band Number: _____

Date of Birth: _____

Marital Status: Married _____ Single: _____ Common-law _____ Divorced: _____ Other: _____

Spouse Full Name: _____

Band Name / Number: _____

Mailing Address: _____

Phone Number: _____ Home/Message/Work Email: _____

PLEASE LIST ALL PERSONS WHO WILL BE LIVING WITH YOU:

Name	Age	Relationship

Present Accommodations (House Address) _____ Own/Rent/Room & Board

Size of current home, condition: _____ Amount: \$ _____

How many rooms are you requesting: _____ Minimum rooms that you would consider _____

Income **FROM ALL** family members: Self \$ _____ Spouse: \$ _____

Family Allowance: \$ _____ Other: \$ _____

Combined Monthly Income: \$ _____

Are you or any member of your family disabled: YES _____ NO _____

If YES please explain disability: _____

Any Health issues: YES _____ NO _____

If YES please explain: _____

Rental References Included Yes _____ No _____

Applicant(s) Signature: _____ **Co-Applicant(s) Signature** _____

Date: _____