

HOUSING APPLICATION

DATE		INDICATE WHICH TYPE OF HOUSING YOU NEED :	
SCORE	<input type="text"/> For administration use only	SUBSIDIZED HOUSING	REGULAR HOUSING
PERSON 1			
NAME:		FIRST NAME:	
MRS	MR	AGE:	DATE OF BIRTH: (DD/MM/YYYY)
PERSON 2			
NAME:		FIRST NAME:	
MRS	MR	AGE:	DATE OF BIRTH: (DD/MM/YYYY)
WHAT IS THE RELATIONSHIP BETWEEN THE PERSON 2 AND THE PERSON 1?			
ADDITIONAL INFORMATION			
ADDRESS OF PERMANENT RESIDENCE:			
BOROUGH:		HOUSE OWNER:	YES NO
PRIMARY EMAIL:		PHONE NUMBER 1:	
REQUEST FOR: 3 ½ 4 ½		PHONE NUMBER 2:	
PARKING : YES NO		SPACE FOR TRICYCLE:	YES NO
THIS HOUSING REQUEST IS FOR HOW MANY PEOPLE?		ANNUAL INCOME OF THE APPLICANT (INCLUDING SPOUSE OR ROOMMATE) \$ /YR	
GROSS MONTHLY INCOME: \$ /MTH		CURRENT RENT COST \$ /MTH (WITHOUT HEATING AND WATER TAX)	
WHY WOULD YOU LIKE TO LIVE AT HABITATIONS LES TRINITAIRES?			
TO BE CLOSER TO FAMILY/FRIENDS	YES	NO	
BECAUSE I AM EVICTED FROM MY APARTMENT	YES	NO	
BECAUSE I HAVE NO APARTMENT	YES	NO	
DID YOU LIVE IN LASALLE BEFORE?	YES	NO	
IF ASKING FOR SUBSIDIZED APARMENT			
PLEASE ANSWER QUESTIONS BELOW AND ON THE BACK OF THIS PAGE			
ARE YOU RECEIVING A GRANT FOR YOUR APARTMENT?	YES	NO	
DO YOU LIVE IN A LOW RENT HOUSING?	YES	NO	
IF ASKING FOR SUBSIDIZED APARTMENT			

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ANSWER THE QUESTIONS BELOW

CANADIAN CITIZEN: YES NO	PERMANENT RESIDENT: YES NO
YOU ARE AT LEAST 60 YEARS OLD: YES NO	
YOU LIVED IN THE MONTREAL METROPOLITAN COMMUNITY (MMC) FOR AT LEAST 12 MONTHS DURING THE LAST 24 MONTHS BEFORE MAKING YOUR REQUEST FOR HOUSING: YES NO	
THE VALUE OF YOUR BELONGINGS (MONEY, INVESTMENTS, IMMOBILIZATION, RRSP) YOU HAVE IS \$50,000 OR LESS: YES NO	
COLLECTIVE GROSS INCOME FOR THE PREVIOUS YEAR IS EQUAL TO OR LESS THAN THE FOLLOWING AMOUNTS:	
- SINGLE PERSON: \$38 000 YEARLY	
- PERSONS IN COUPLE \$38 000 YEARLY	
- TWO (2) PERSONS NOT IN COUPLE (ROOMMATE) : \$43 500 YEARLY	
NOTES :	
SIGNATURE :	DATE :
PLEASE FORWARD YOUR REQUEST TO : Habitations Les Trinitaires 1771, Angrignon blvd, #100, LaSalle (Québec) H8N 0C6 or email it to info@lestrinitaires.ca	