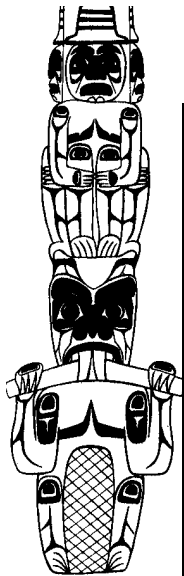


VANCOUVER NATIVE HOUSING SOCIETY

REGISTRY OF OCCUPANTS

Home Phone #: _____ Work Phone #: _____ Other Phone #: _____

In order for our Administration department to have current and up to date information on **ALL** occupants you are requested to provide this office with the following information: the **FULL NAMES, BIRTHDATE** and **RELATIONSHIP** to the principle tenant **(EXAMPLE: SON, DAUGHTER COMMON LAW SPOUSE, etc.)** Also **LIST INCOME AMOUNTS & INCOME SOURCE FROM ALL SOURCES OF ALL MEMBERS OF YOUR HOUSEHOLD FOR THE YEAR.** To support your statement of income claim for all household members please submit along with this completed form, supporting documentation for all household income such as pay stubs, Tax Assessment, verification of income from your employer, band sponsorship, pension, EI stubs, financial statements etc. Should you have difficulty please contact the office at (604) 320 – 3312.



LIST OF OCCUPANTS/INCOME AND INCOME SOURCE			
NAME (primary tenant name first)	BIRTHDATE (M/D/Y)	RELATIONSHIP	INCOME & INCOME SOURCE
1.			
2.			
3.			
4.			
5.			
6.			
7.			
IN CASE OF AN EMERGENCY LIST 3 NAMES AND PHONE NUMBERS OF PERSONS WE CAN CONTACT ON YOUR BEHALF			
CONTACT PERSON		PHONE NUMBER	
1.			
2.			
3.			

DECLARATION/AUTHORIZATION:

I _____ residing at _____ certify that
Tenant Name Full Address

the information given here is complete and correct. I authorize Vancouver Native Housing Society to obtain verification of the information from employers or other sources. I acknowledge that failure to comply with appropriate and acceptable evidence of income as requested will result in the household having to pay the full Low End Market Rent/Economic Rent as determined by CMHC/BCHMC.

TO ENSURE THAT YOUR SUBSIDY IS ACCURATE AND IN PLACE PLEASE MAKE SURE THAT YOU COMPLETE ALL THE INFORMATION REQUESTED IN THIS FORM.

Signed: _____
Primary Tenant Signature

Date: _____