



Caroline Co-operative Homes Inc.

93 Longboat Avenue, Toronto, Ontario M5A 4C6

Bus: 416-862-0847

Email: carolinecoop@rogers.com

Thank you for your interest in Caroline Co-operative Homes Inc.

Caroline Co-op is located in downtown Toronto, specifically south of the Esplanade, east of Sherbourne, west of Parliament and north of the CNR tracks (north of Lakeshore Blvd). The Co-op has been occupied since the 1980's. The Co-op consists of sixty units, comprised of stacked apartments and townhomes located on Hahn Place and Longboat Avenue. There are 18 - one-bedroom units, 24 - two bedroom units and 18 - three bedroom units. The units on Hahn Place are three bedroom townhomes with a one bedroom unit above and Longboat Avenue is a combination of all units. There are no wheelchair accessible units.

Like all Co-op's, there is no landlord; the people (members) who live here run the Co-op through a democratically elected Board of Directors, Committees of Volunteers and Meetings of the membership. Since members are responsible for the running of the Co-op, all members are required to volunteer few hours of work each month. The volunteer work may take the form of service on the Board, a Committee or work on the grounds, etc. All members are obligated to attend regular Member's meetings, usually held four times a year. Advantages of Co-op living are housing charges (rent) may be below market rates, excellent maintenance, long-term residence, security and a strong community.

The Co-op employs 1 staff (Co-ordinator/Manager) who oversees the daily running of the Co-op and 2 part time staff (maintenance and financial).

Canadian Mortgage and Housing Corporation (CMHC) assist us financially with an annual grant towards funds to subsidize members (should not pay more than 30% of gross income or the shelter portion) for housing. *There are no subsidies available.*

To apply for membership, you MUST complete the form (attached) and include the following:

- 1. \$15.00 application fee per applicant (for everyone over 18 years of age)*
- 2. Income verification (see pages 11 & 12 for the reference)*
- 3. Pages 1 to 5 must be all completed and returned with all required documents*
- 4. Pages 8 and 9 require signatures*
- 5. Page 7 must be completed by the previous landlord and returned directly to Co-op*

The Member Selection Committee will contact you to arrange a time for an interview. Upon being accepted for Membership in the Co-op, you will be placed on a waiting list for a unit (could take a few years, depends on vacancies). If you move or change your phone number, please make sure you contact the office so that information can be updated on the application.

If you have any questions, please contact the office and we look forward to meeting with you in the future.

PLEASE NOTE: Applications are held in date order and incomplete forms will be returned to your attention for completion, which will delay the order you are contacted.

Caroline Co-operative Homes Inc.

Membership Application

<i>Office Use Only</i>
<input type="checkbox"/> Application fee received

Chq/MO #

Date received by Co-op

The application consists of two parts, which are kept separate because they each require information of a different degree of confidentiality. The first part is general information on members of your household and is accessible to various co-op committees. The second part is for reference and financial information and is available only to the office administrator to aid in the assessment of you as potential member/resident.

PLEASE PRINT CLEARLY - USE EXTRA PAGE IF MORE SPACE NEEDED

(a) HOUSEHOLD COMPOSITION [*Adults - each person 18 years of age or older*]

1st Person

Name: _____

Address: _____

_____ Postal Code: _____

Telephone Home: _____ Work: _____

Can we telephone you at work? : YES _____ NO _____ Date of Birth: _____

Year/Month/Day

2nd Person

Name: _____

Address: _____

_____ Postal Code: _____

Telephone Home: _____ Work: _____

Can we telephone you at work? : YES _____ NO _____ Date of Birth: _____

Year/Month/Day

3rd Person

Name: _____

Address: _____

_____ Postal Code: _____

Telephone Home: _____ Work: _____

Can we telephone you at work? : YES _____ NO _____ Date of Birth: _____

Year/Month/Day

(b) HOUSEHOLD COMPOSITION [*Persons under the age 16 years*]

Last Name	First Name	Relation to Adult	Gender	Date of Birth Year/Month/Day

HOUSING INFORMATION (*Note: Policy only allows min of 1 person/bedroom to a max of 2 persons/bedroom*)

Size of Unit required (*check one only*):

1-bedroom unit 2-bedroom unit 3-bedroom unit

Does any member of your household have any health problems that affect your housing needs? Please specify: _____

Do you require a parking space? : _____ How many: _____

Number of Vehicles: Car _____ Truck/Van: _____ Other (specify): _____

License Plate Number(s) for each: _____

Do you have any pets? : **YES/NO** How many: _____ Types: _____

(*Note: Pet Policy only allows for one dog or two cats or one dog and cat- proof of vaccines required annually*)

(c) PARTICIPATION

Your participation in the co-op cannot be over emphasized. Signing this application form commits you to participate in the operation and management of this co-operative. In addition to attending general members meetings, there are many ways to participate and each member is to give 4 hours per month to the co-op. Some of the standing committees are:

Board of Directors _____	Membership _____	Landscape _____
Maintenance _____	Finance _____	On-Call _____
Social _____	Newsletter _____	Green _____

Delegate Representative to Outside Association _____

This Part of the Application is confidential and is only used by the Manager

(d) ACCOMMODATION HISTORY

Please list 3 years of accommodation history for each adult member applying for membership. If more space is required, please add an extra sheet.

Length of time at Present Address: Years: _____ Months: _____

Estimate your monthly housing cost (mortgage, utilities, taxes, maintenance) \$ _____

Rental: Monthly Rent: \$ _____ Utilities included? YES _____ NO _____

Monthly Utilities (heat, hydro, water) cost: \$ _____ # of Day for Notice: _____

Landlord Reference:

Please have your previous landlord complete the questions on Page 7 of the application and return it to the Co-op, signed. Please ensure their complete name, address and phone is included. This form can be mailed or faxed directly to the Co-op.

Your landlord information is required as reference.

Landlord/Company Name: _____

Landlords' address: _____

Postal Code: _____ Telephone: _____

If you do not wish to get a reference letter, please write a letter explaining why.

(e) GROSS INCOME - Attach appropriate proof of income [see pages 10 & 11 for guidelines]

Please list all adults (over the age of 18) gross monthly income from all sources, including support payments, social benefits, etc. Child Benefits (Child Tax Credit) is not included.

<u>SURNAME</u>	<u>GIVEN NAME</u>	<u>SOCIAL INSURANCE NUMBER</u>	<u>GROSS MONTHLY INCOME</u>
1.			
2.			
3.			
4.			
5.			

6.			
----	--	--	--

1st Person

Present Employer: _____

Address: _____ Phone #: _____

May we call your employer for a reference? Yes _____ No _____

If less than two years, give previous Employer: _____

Address: _____ Phone #: _____

May we call your employer for a reference? Yes _____ No _____

2nd Person

Present Employer: _____

Address: _____ Phone #: _____

May we call your employer for a reference? Yes _____ No _____

If less than two years, give previous Employer: _____

Address: _____ Phone #: _____

May we call your employer for a reference? Yes _____ No _____

3rd Person

Present Employer: _____

Address: _____ Phone #: _____

May we call your employer for a reference? Yes _____ No _____

If less than two years, give previous Employer: _____

Address: _____ Phone #: _____

May we call your employer for a reference? Yes _____ No _____

(f) PROOF OF CITIZENSHIP

A copy of Canadian Citizenship (birth certificate or passport), Landed Immigrant or Refugee status documents **MUST** be provided for everyone in the household.

I/we understand that:

- 1) To be eligible to occupy a housing unit I must become a member of Caroline Co-operative Homes Inc. and sign the Occupancy Agreement. I support the co-operative principle and am interested in becoming a member. ***I enclose \$15.00 for each person over eighteen years of age as an application fee. I understand the application fee is non-refundable.***
- 2) Once I occupy a housing unit, I shall pay to Caroline Co-operative a monthly sum called the "Housing Charge" to cover the expenses for the unit. Housing Charge covers mortgage payments, interest, taxes, water and heat. The housing charge does not include hydro or parking fees.
- 3) Within three (3) banking days of notification of a unit assignment I shall pay a ***non-refundable*** Membership Fee of \$5.00 and a ***non-refundable*** deposit of one month's housing charge by certified cheque or money order. When keys to the unit are received, a certified cheque or money order for the last months housing charge and the maintenance guarantee is payable.
- 4) I must provide the Co-operative with a letter from my employer verifying my employment, position and salary within two weeks of notification of acceptance of my application.
- 5) All the information in this application is correct and hereby authorizes the Co-op to verify any or all of the information contained herein, and to perform a credit check at the discretion of the Co-op.

Please make your cheque or money order payable to:

Caroline Co-operative Homes Inc.
93 Longboat Avenue
Toronto, Ontario M5A 4C6

All Applicants 18 years of age or older *MUST* print, sign and date below

Name	Signature	Date
1.		
2.		
3.		
4.		
5.		
6.		

Consent Form - Applicant Mandatory Consent

Information:

The word information means credit information, personal information, information about the services you use that are provided by Caroline Co-op and information relating to your current housing situation including information regarding the duration of your tenancy, monthly rent, emergency contracts and any matter relating to your lease/tenancy/occupancy agreement, including misrepresentations relating to defaults under and /or breaches of your lease/tenancy/occupancy agreement.

Credit Information:

means information about you, including your name, age, date of birth, occupation, place of residence, previous place of residence, marital status, co-occupant's/spouse/same sex partner's name and age, number of dependants, particulars of education or professional qualifications, places of employment, previous places of employment, estimated income, estimated income, paying habits, outstanding debt obligations, cost of living obligations, involvement in bankruptcy proceedings or landlord and tenant disputes, assets and banking information (including account and credit card information).

Personal Information:

means information about you other than credit information that is relevant to your suitability as a member/occupant, including your social insurance number, driver's license number, vehicle license plate number, vehicle make and year and information from references which you provide about your character, reputation, physical and personal characteristics or mode of living or about any other matter concerning you that is relevant to your suitability as a member/occupant.

Landlord Reference

Please have your **previous Landlord** (*company /or person to whom you wrote your cheque to*) complete the following questions and return to our attention. If you own your home, please have the financial institution that holds/held your mortgage complete this page.

This form must be sent directly to Co-op.

a) What was the monthly rent for these tenants? _____

b) How much notice are they required to give? _____

c) What, if anything, is included in their rent (hydro, utilities, cable, parking, etc)?

d) Did you ever have any problems with these tenants paying rent on time (e.g. Late, NSF, etc)?

e) If so, how many times in the last 12 months? _____

f) Have you had any problems with these tenants (e.g., noise complaints, etc)?

g) Would you recommend these tenants?

Landlord Information

Name: _____

Mailing Address: _____

Telephone #: _____

Landlord or Representative Signature

Date

Personal Information Consent

(For use with housing application forms)

I/we have provided Caroline Co-operative Homes Inc. with personal information about me, as set out below.

I/we consent to the Co-op using it for the purpose stated, and sharing it with the organizations specified.

The type of personal information provided:

- Contact information (address, telephone number, e-mail address, etc)
- Members in the household (date of birth, social insurance number)
- Vehicle License Plate number and registration
- Financial information (annual household income, place and type of employment)
- Reference information (name of current and/or previous landlord)

The Co-op will use the information as follows:

- to contact me about this application
- to determine my eligibility for housing and membership
- to determine my eligibility for relocation
- to meet the requirements of federal or provincial laws, the co-op's by-laws , occupancy agreements or any legally binding contracts

The Co-op will share the information with the following other organizations when necessary:

- the auditors of the Co-operative
- the Co-operative's lawyer
- Government departments or agencies as required by law.

I/we understand that the Co-op will destroy personal information that is no longer needed. I/we have read and received a copy of this statement.

All Applicants 18 years of age or older *MUST* print, sign and date below

Name <i>(print clearly)</i>	Signature	Date
1.		
2.		
3.		
4.		
5.		
6.		

Note: *The Co-op uses Rent Check Credit Bureau to do background checks and applicant(s) will be asked to sign a separate form developed by Rent Check.*

Collection, Use and Disclosure of Information

In consideration for Caroline Co-operative Homes Inc. accepting you as a tenant and entering into an occupancy agreement with you, you expressly consent to and authorize the following:

1. Caroline Co-operative Homes Inc may obtain information about you through a tenant check and/or credit or consumer report conducted by Rent Check Credit Bureau and as permitted or required by law. You expressly authorize Rent Check Credit Bureau to provide information regarding you to Caroline Co-operative Homes Inc.
2. Caroline Co-operative Homes Inc. may use information about you to determine your suitability as a member and as permitted or required by law.
3. Caroline Co-operative Homes Inc. may disclose information about you as permitted or required by law and to Rent Check Credit Bureau in order to be included within a database of tenant information, and/or within a file on you, for the purpose of:
 - Tenant reporting and credit reporting in accordance with the Consumer Reporting Act (Ontario)
 - Establishing a credit history and a rental history
 - Comparing with aggregated statistical data for purpose of tenancy and credit scoring, and
 - Supporting the credit approval process.
4. You expressly authorize Rent Check Credit Bureau to retain information regarding your indefinitely for the purpose outlined in section 3 above, subject to any legal restrictions.
5. You expressly authorize Rent Check Credit Bureau to disclose information regarding you to its members and subscribers as required or permitted by law and for the purpose outlined in section 3 above.
6. You agree that you will not withdraw your authorization and consent to the collection, use and disclosure of information about you by Rent Check Credit Bureau as outline in section 1 to 5 above.
7. You agree that all statements on this application are true and authorize Caroline Co-operative Homes Inc. to verify all references given.

I/we have read and agree to the collection, use and disclosure of information as outline above and I/we sign this document voluntarily, agreeing to the terms and conditions outlined above.

All Applicants 18 years of age or older *MUST* print, sign and date below

Name <i>(print clearly)</i>	Signature	Date
1.		
2.		
3.		
4.		
5.		
6.		

Acceptable Forms of Income Verification

Please provide a copy of the income verification. Affidavits are not acceptable proof.

Employed

- Provide a letter from your employer. The letter must be written on company letterhead, which provides the company's name, address and phone number. The letter must include the date the reported salary was into effect and must be signed by company-authorized personnel.
- If it is impossible to obtain a letter, three consecutive pay slips may be submitted instead. The pay slips must include the person's name or social insurance number; if only the social insurance number appears on the pay slips, the member's social insurance card must be photocopied for the files.
- A certified income tax notices of assessment from Canada Customs and Revenue.

Self-employed

- The member's most recent certified tax return or audited financial statements and an estimate of current income, must be submitted.

Social Assistance

- A letter from the agency providing the assistance must be submitted. The letter must be on the letterhead of the agency, which provides the agency's name, address and phone number. The letter must include the effective date of commencement of assistance, the amount, and must be signed by agency-authorized personnel. Copy of Drug Card must be provided.

Assets

- Copies of passbooks and other documents OR verifications from the bank, credit union, trust company of assets owned

Old Age Pension or Annuity Income

- Copy of cheque stub showing gross amount and frequency of payment

Employment Insurance Benefits

- Benefit's statements showing gross weekly payment

Support Payments

- Copies of cancelled cheque (showing support received) plus a copy of legal documents (court order, legal domestic contracts)

Types of Income

Employment Related Income

- Salary or wages
- Bonuses or incentive pay
- Gratuities or tips
- Overtime pay if overtime is done on a consistent basis
- Commissions
- Employment Insurance Benefits
- Workplace Health and Insurance Board (short and long term)
- Work Incentive Programs
- Training Allowance
- Net income of a business or other self employment activity
- Regular payments from accident, disability or illness insurance

Investment Related Income

- Interest income from assets and investments (bank, credit union and trust company accounts, capital gains, term deposits, bonds or debentures)
- Dividend income from stock or shares
- Interest portions from any mortgage or loan
- Annuities (life, fixed terms or converted registered retirement saving plans)
- The income (determined by the co-op and based on a reasonable rate or return) from non-income producing assets such as precious metals, gems and art, financial holdings, RRSP's real estate, etc.

Other

- Ontario Works (OW) or Ontario Disability Support Program (ODSP)
- Guaranteed Annual Income System for the Disabled Benefits - GAINS D, CPP D
- Student grants or loans and a copy of their timetable or letter from an educational institute
- Pensions
- Support Payments

BEFORE YOU SEND IN YOUR APPLICATION

- ❑ DID YOU COMPLETE ALL THE SPACES (Blanks on pages 1-5) ON THE APPLICATION?
- ❑ DID YOU INCLUDE THE CURRENT LANDLORD'S NAME, ADDRESS AND PHONE NUMBER?
- ❑ DID YOU SIGN PAGES 8 AND 9?
- ❑ DID YOU SENT PAGE 7 TO YOUR PREVIOUS LANDLORD AND HAVE THEM RETURN IT TO THE CO-OP'S ATTENTION?
- ❑ HAVE YOU INCLUDED YOUR INCOME DOCUMENTS (Copies Only) FOR ALL THOSE OVER THE AGE OF 18 WHO ARE WORKING?
- ❑ DID YOU INCLUDE SCHOOL DOCUMENTS FOR THOSE ATTENDING SCHOOL FULL TIMES (This Would Include High School, College, and University)?
- ❑ DID YOU INCLUDE YOUR APPLICATION FEE OF \$15.00 PER PERSON FOR ALL THOSE OVER THE AGE OF 18?
- ❑ DON'T FORGET TO ADVISE OUR OFFICE IF YOU HAVE ANY CHANGES TO YOUR APPLICATION.

Thank you for applying at
Caroline Co-operative Homes Inc.