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MARKET RATE INFORMATION

<u>Unit</u>	<u>Housing Charge</u>	<u>Shares</u>	<u>Income Required</u>
1 Bedroom Apt	\$ 777	\$1000	\$31,000
2 Bedroom Apt	\$1,001	\$1200	\$40,000
3 Bedroom Apt	\$1,109	\$1500	\$44,000
(all 3 bedroom apartments are wheel chair accessible units)			
3 Bedroom Townhouse	\$1,200	\$1500	\$48,000

We are located in central Richmond, close to schools, transportation, shopping and community facilities.

We have 63 units as follows:

- 1 bedroom apartments 12 (3 wheelchair accessible)
- 2 bedroom apartments 24 (3 wheelchair accessible)
- 3 bedroom apartments 3 (all wheelchair accessible)
- 3 bedroom townhouses 24 (2 or 3 levels)

Every 6 months you will be required to confirm that you wish to stay on the waitlist. You may do this by writing or emailing us. If you do not advise us every 6 months, your application will be considered inactive and will be removed from the wait list.

We are looking for members who want to contribute their time and talent to make their home a better place to live. Active participation is mandatory.

** Please keep these first 2 sheets for your information**



In order to better understand what it means to be part of a co-op, please take the time to read the following information before submitting your application.

A housing co-op is a group of people working together to enjoy the security of long-term housing. The success of a co-op depends on its' members. Members must actively participate in the day to day running of the co-op by serving on committees and attending member meetings. If you've volunteered before and enjoyed it, if you're looking for a home with a sense of community, if you're interested in participating to make the co-op a success then co-op housing is for you. If you're just looking for somewhere to live then co-op housing is not for you!

The units in a co-op are not individually owned. The co-op owns the building and property and members "lease" their units. Instead of rent, members pay a monthly housing charge that is based on the cost of operating the co-op.

If you are willing to make a commitment to this type of community living then please submit your application. Our member selection involves several steps: Application: Complete and return an application form and you will be placed on the waiting list. Every six months you are required to update your information and confirm that you wish to stay on the waiting list.

Interview: When a unit is available, applicants will be invited to attend an interview. This give us the chance to explain how the co-op works, see where your skills might fit into co-op life, and answer your questions.

Screening: We check landlord, employment and personal references. We credit check all applicants.

Approval: Our elected Board has the final approval of all applicants based on the recommendation of your interview team.

Sign Up: If you are accepted to the co-op, you will need to make an appointment with our office manager to sign all your papers, pay your shares and bring in any other required documents requested by the office.

The number of vacancies in our co-op varies. Acceptance to the wait list does not mean that you will pass the required steps to be accepted to the co-op.

MEADOW WALK HOUSING CO-OP
APPLICATION FORM

For Office Use Only:

Date Received: _____

Unit Size: _____

Market (Y/N):

PERSONAL INFORMATION

Applicant Name:

(Last name)

(First Name)

Current Address:

Daytime Phone:

Evening Phone:

Email:

How long have you lived at your current address?:

If less than 2 years, please give previous address:

Landlord's Name and Phone

Number: _____

Co-Applicant Name:

(Last Name)

(First Name)

Relationship to Applicant:

Current Address if Different

May we contact your landlord for a Reference? _____

(If not please comment) _____

Other Household Members:

_____ Name	_____ Date of Birth	_____ Male/Female	_____ Relationship to Applicant
_____ Name	_____ Date of Birth	_____ Male/Female	_____ Relationship to Applicant
_____ Name	_____ Date of Birth	_____ Male/Female	_____ Relationship to Applicant
_____ Name	_____ Date of Birth	_____ Male/Female	_____ Relationship to Applicant

Applicants Employment History:

Name of Employer: _____

Address of Employer: _____

Supervisor's Name and
Number: _____

Position and Length of
Employment: _____

If less than 2 years, please provide previous employer

Name & Address of Employer _____

Supervisor's name and Number: _____

Position and length of Employment: _____

Co-Applicant's Current Employment:

Name of Employer: _____

Address of Employer: _____

Supervisor's Name and Number: _____

Position and Length of Employment: _____

PETS:

The co-op has a limit of **one dog* or cat per unit** (*Size and breed limits apply)

Do you own a pet? Yes (____) No (____)

Specify Type of Pet Owned: _____

HOUSING REQUEST: CHOOSE ONE ONLY

Townhouse (3 bedroom)

2 level townhouse (_____)

3 level townhouse (_____)

1 bedroom apartment (_____)

2 bedroom apartment (_____)

Physically Challenged:

1 bedroom (____) 2 bedroom (____) 3 bedroom (____)

PARKING:

One primary space if you own a vehicle. Second spaces only when available.

Do you own a vehicle?: Yes(____) No (____)

Type of Vehicle _____

COMMITTEES:

Which committee would you be prepared to serve on?

_____ Finance (Financial Running of Co-op)

_____ Membership (Interviewing prospective members/participation)

_____ Grounds Keeping (general upkeep of all garden areas)

_____ Maintenance (general upkeep of co-op)

_____ Social (organizing events to bring co-op members together)

_____ Strategic Plan (long-term planning for co-op)

REFERENCES:

Please provide two references that are NOT related

Name	Address	Phone
_____	_____	_____
_____	_____	_____

Name	Address	Phone
_____	_____	_____
_____	_____	_____

Volunteer Activities

Please list all volunteer activities that you or your family have participated in during the past two years:

Please list any skills that you will contribute to the co-op:

Why do you want to live in a housing co-op?

Meadow Walk Co-operative respects your privacy and the personal information requested on this application is solely for the purpose of verifying your eligibility for membership with us. Certain personal information is required to confirm that your housing request complies with our mandated guidelines. These guidelines include (but are not limited to): income, number of family members per bedroom, and pets. The Co-operative is maintained by the Membership; therefore, it is necessary that we check references of interested parties to ascertain that they will be an asset to the co-operative and act in a responsible and reliable manner and that they will not be a threat to the safety or well-being of the co-operative or its' members. The information provided will not be shared with anyone other than those persons at Meadow Walk Co-operative whose duties include the processing of applications. Should you have any questions or concerns regarding the information we have requested, or the use of it, or should you require a copy of our Personal Information Protection Policy, please contact our office.

Applicant Signature

Date: _____

Co-Applicant Signature

Date: _____

INCOME VERIFICATION FORM MARKET: _____

SUBS: _____

We require the following information in order to maintain the economic stability of the co-operative. Accuracy is essential.

- In all categories of income use the present Gross Annual Figures
- List all sources of Household Income

	Applicant	Co-applicant	Other	Household	Members
Salary/ Commission					
Self Employed					
Unemployment Insurance					
Pensions					
GAIN/GIS					
Interest of Investments					
Child Support/ Alimony					
Student Loan					
Other					
TOTAL					

Proof of income will be required in the interview process (copies of last 3 months' pay stubs; tax assessment for the last year constitutes proof)

Please indicate here if you expect any significant changes in your income during the next 12 months. Please give approximate date and reason: _____

Applicant's Social Insurance Number: _____

Applicant's Date of Birth (DD/MM/YYYY): _____

Applicant's Signature in Full: _____

Date: _____

Co-Applicant's Social Insurance Number: _____

Co-Applicant's Date of Birth (DD/MM/YYYY): _____

Co-Applicant's Signature in Full: _____

Date: _____