DIRECTORY OF CO-OPS

Bridge Housing Co-operative Ltd. Box 985, Stn Main Lethbridge, AB T1J 4A2 E bridgehousingcoop@gmail.com

SIZE	TYPES	BATHROOMS	SQUARE FEET	MAX. HOUSE CHARGE	MIN. HOUSE CHARGE		UNITS INCLUDE	PETS ALLOWED	AMENITIES
30 Units	2&3 BR Townhouses	1 and 1.5	N/A	\$850 - \$905	N/A	\$1000: Half paid prior to moving in, remaining balance to be paid within 3 months.	Fridge, stove, basement, laundry hook- ups, fenced yard, water/ sewer and parking.	No exotic pets.	Schools, shopping, playgrounds, bus, church. Some units near uni- versity and lake.

ACCEPTING APPLICATIONS	APPLICATION FEE	WAITING LIST	SUBSIDY AVAILABLE	MOVE OUT NOTICE
Yes	No	No	Yes	Two months notice prior to move-out date.



BRIDGE HOUSING CO-OP APPLICANT INFORMATION

Name:					
Last		N	Middle		First
Address:					
Apt. #		City		Province	Postal Code
Phone:	H	ome			Office
Date of Birth:	_// //_	Year			
Social Insurance Number:		·			
Drivers License Number:				-	
Marital Status:	Single	Married	Other: _		
Number of Vehicle(s):	Make		Model		Lic.# ———
	Make _		Model _		_ Lic.#
List ALL other person(s)	who will be re	esiding in your	unit and their	relationship t	o the applicant: Relationship
	Name				Relationship
	Name				Relationship
	Name				Relationship
	Name				Relationship
Will your unit have pets?	Yes / No	o I	f yes, how ma	ny?	

If no pets, will anyone in your l	nome mind liv	ving near pets? _		
Will anyone in your home have	health proble	ms that affect you	r housing needs?	
List all places of residence				
Location	Year	ſ _.	Landlord	Phone
_				
Length of time at present addre	ss:			
Monthly Rent A	are utilities in	cluded?	Yes / No	
Have you ever lost a damage de	posit, partial	or full?	Yes / No	
If so, explain:				
Do you have up-to-date tenant	insurance at tl	nis present time?	Yes / No	
Company:			Expiry Date: _	
Will you have a waterbed?	Yes N	0		
Is it covered in your policy?	Yes N	0		
Number of bedrooms required:				

Work History over the last five years:

Employer	Position	Dates
Total Gross Monthly Income from	all sources:	
Credit References: (Two places w	here business is done regularly an	d are acceptable. e.g. garage. and
daycare)	•	
		Phone:
Bank Name and Branch Address:		
Have you previously applied to or	ived in another Co-op?	es / No
If so, which one and when?		
Do you know anyone who currently	v lives in Bridge Housing Co-op?	
How do you know him/her?		
How did you have about Bridge Ho	using Co. on?	
How did you hear about Bridge Ho	using Co-op:	
Do you play a musical instrument?	If so, what kind?	
	1 0 W /N	
Are you a student or planning to		
If so, which program and how man	y years is the course?	
What are your reasons for applying	?	

SPOUSE/CO-APPLICANT INFORMATION

Name:La	at	<u> </u>	Middle		First
La	Si	1	VIIGUIC		TISt
Address:					
Address: Apt. #		City		Province	Postal Code
Phone:					
	Home			Office	
Date of Birth:Day	y Month	Year			
Social Insurance Numb	oer:				
Drivers License Numb	oer:				
Marital Status:	Single	Married	Other:		
Number of Vehicle(s):	Make	<u> </u>	Model		Lic.#
	Make	2	Model		Lic.#
List all places of r	esidence ove	r the last five	years:	ord	Phone

Monthly Rent	Are utilities included?	Yes	No
Have you ever lost a damage	deposit, partial or full?	Yes	No
If so, explain:			
Do you have up-to-date tenar	nt insurance at this present time?	Yes	s / No
Company:		Expiry	Date:
Will you have a waterbed?	Yes No		
Is it covered in your policy?	Yes No		
Number of bedrooms require	ed:		
Work History over the la	st five years:		
Employe	Position	on	Dates
Total Gross Monthly Income	from all sources:	I	
Credit References: (Two pladaycare)	aces where business is done regu	ılarly and a	are acceptable, e.g. garage, and
•			Phone:
		1	Phone:
Bank Name and Branch Add	ress:		

Have you previously applied to or lived in another Co-op? Yes / No
If so, which one and when?
Do you know anyone who currently lives in Bridge Housing Co-op?
How do you know him/her?
How did you hear about Bridge Housing Co-op?
Do you play a musical instrument? If so, what kind?
Are you a student or planning to be one? Yes / No
If so, which program and how many years is the course?
What are your reasons for applying?
Every member of Bridge Housing Co-operatives serves on one of four committees, Membership, Finance, Maintenance and Policy. Which committee would you like to serve on and why?
Applicant
Spouse/Co-applicant
In what specific ways do you feel you can contribute to the Co-operative? (Skills, abilities, past experience, etc.) Applicant
Spouse/Co-applicant

DECLARATION OF UNDERSTANDING AND INTENT

I understand that each member of Lethbridge Housing Co-operative Limited must join or be attached to a standing committee and must regularly attend all of the General and Committee meetings and that absenteeism may lead to expulsion from the Co-op.

I understand that if accepted into the Co-op, my continuing membership will depend on the following conditions being maintained:

- a) Willingness to participate in the operation of the Co-op;
- b) Respect for the rights of other members/residents:
- c) Faithfulness in my financial obligations; and
- d) Income and family size with the co-operative requirements.

Bridge Housing Co-operative Limited expects that applicants not willing to subscribe wholeheartedly to co-operative principles will voluntarily withdraw their applications.

I understand that I will sign the Co-operative's Housing Capital Agreement when I move into a unit and abide by all directives contained therein.

I understand that by becoming a member of Bridge Housing Co-operative, I am legally bound to abide by its Memorandum of Association and Supplementary Bylaws.

I understand that prior to signing the Housing Agreement, I must submit to the Co-op a certified cheque or money order for the Member Share of \$1000.

I understand that the first months Housing charge will become due and payable before the first day of occupancy.

I understand that a credit check is required prior to membership, and hereby authorize this credit check.

I declare the preceding personal information to be correct I understand that this application does not constitute an agreement to provide me with accommodation, and I further—acknowledge that this application is the property of Bridge Housing Co-operative Limited. I hereby authorize you or your agents to make inquiries, which you deem necessary to verify the above statements.

Applicant:	Date:
Spouse:	Date: