

Frances Gardens Housing Co-operative

PO Box 164

Sooke BC V9Z 0P7

Francesgardens6579@gmail.com

250-642-4242 Fax: 250-642-7242

*To provide safe, secure, affordable homes for our members in a community where we all work together.
We believe in the values of affordability, safety, financial stability, sound management, security, and family.*

Dear Applicant,

Thank-you for your interest in Frances Gardens Co-operative, we are always accepting applications. Frances Gardens is a 36-unit co-op in Sooke, BC, all units are approximately 2,200 square feet and have 3 bedrooms, living space, kitchen and full bath on the upper floor, ground level floor varies from unit to unit. We are operated by a volunteer board of directors elected by the membership. Applications are open to any family and age; you must be 19 years or older to be the applicant or co-applicant. Here are some key points to consider before applying for membership.

1. Wait is generally long before a unit becomes available. Current members are required to provide 60 days notice and occupancy is generally 30 days after the member leaves.
2. Applications are held for 6 months, if you are interested in reapplying you must notify us by email at francesgardens6579@gmail.com to provide us with your intent to reapply. After one-year inactive applications are destroyed.
3. When a unit becomes available, you may be contacted for an interview. All references will be checked at this time, proof of income and spay/neuter certificates will also be required. An interview does not mean you have been the successful applicant. A membership committee will hold interviews, report to the board of directors, and a decision will be made. Upon approval of financials you will receive a phone call from the board offering membership. It is a process, please be patient.
4. You must complete the application in full including signatures, and everyone in the household 19 years or older is required to sign the personal protection information statement. If your application is incomplete it is not valid and will be destroyed.
5. Please include with your application a cover letter telling us about your family and why you think you would make a great addition to the Frances Gardens community.

Please find attached the membership application and personal protection information statement.

Thank-you,

The Board of Directors

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Membership Application Form

Applicant

Full name
Date of birth
Full address
Contact phone number
Email

Co-applicant

Full name
Date of birth
Full address
Contact phone number
Email
Relationship to applicant

Other household members

Please provide all household members and relationship. If 19 years or older provide date of birth.

Name	Relationship	Date of Birth (19 years and up)

Housing background

	Contact number	How long at this location
Current landlord		
Previous landlord		

Parking

Parking is limited and Frances Gardens does have a parking policy which all members are required to follow.

How many parking spaces do you require?

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Pet policy

Frances Gardens has a pet policy that members are required to follow. You will be required to provide proof of spay/neuter if the co-op calls you for an interview.

Type of pet and name	Spayed/neutered

Personal references

Please provide us with 3 personal references for applicant/co-applicant.

For applicant

Reference	Contact number	How long have you known them

For co-applicant

Reference	Contact number	How long have you known them

Do you know anyone who resides in Frances Gardens Co-operative?

If yes who do you know and how do you know them?

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Household income

Please provide gross monthly income for all household members who are 19 years of age and up. You will need to provide proof of income if the co-op calls you for an interview. This page will be kept separately to limit access to your financial information.

Will you require subsidy?

Gross Income

Name	Source of income	Gross monthly income

Declaration

We understand that only the members of Frances Gardens may live in the co-op and we apply for membership, as set out below.

We understand that, if the co-op accepts us for membership and offers us a unit, we must buy a share purchase of \$5,000 for the members.

If accepted into membership, we agree to be bound by and to comply with the Rules, occupancy agreement and policies of the co-op in force and as amended from time to time.

We declare that all the information in this application is correct. We give the co-op permission to verify any or all this information, to do a landlord check, and personal reference check for applicant and co-applicant.

The personal information protection statement is to be signed with this application form.

	Printed name	Signature	Date
Applicant			
Co-applicant			

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Personal Information Protection Statement

All applicants 19 years and up must sign this at the same time as their application form.

I agree that Frances Gardens may collect and keep the following information about me:

1. Financial information to set initial housing charges based on household income. If I do not qualify for subsidy, the co-op will destroy this information one year after making that decision.
2. Financial information yearly to set housing charges based on household income.
3. Eligibility information to qualify for the supplementary Homeowner Grant.
4. Co-op census information, including a record of all residents in each unit for security.
5. Relationship of co-applicant to applicant, dates of birth of applicant, co-applicant, and all future occupants 19 years or older. – if this is required to establish the size of unit to which my household is entitled, based on co-op occupancy standards, or to establish subsidy and housing charges.
6. Date of birth for purposes of reporting unpaid debts to a collection agency or credit bureau.
7. Whether I meet the age requirements for membership (19 years old) as set out in the co-op's Rules

I agree that this personal information may be made available to people in the following positions, if the information is needed for their duties:

1. Co-op auditor
2. Employees of the Agency for Co-operative Housing or CMHC (Canada Mortgage and Housing Corporation)
3. Municipal employees dealing with the Homeowner Grant (for grant application)
4. Co-op lawyer
5. Co-op staff or management
6. Designated staff or committee member(s) who have designated official duties for:
 - applications for membership: membership committee, board of directors
 - income review and setting housing charges: president, treasurer, bookkeeper
 - applications for the Homeowner Grant: board of directors, bookkeeper, auditor
 - collecting signatures for the Homeowner Grant: board of directors,
 - collecting co-op census information: board of directors, bookkeeper, auditor
 - landlord and other reference checks: president, treasurer, bookkeeper
 - maintaining secure filing and storage of personal information (both hard copy and computer): president, treasurer, bookkeeper
7. Board of directors only if it is in connection with the Board's official duties
8. General meeting only if it is relevant to an appeal that I make of a board decision.

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I understand that Frances Gardens will use the information to:

1. Contact me about this application.
2. Determine my eligibility for housing and membership in the Co-op.
3. Establish the size of unit for my household, based on co-op occupancy standards.
4. Decide if I qualify for subsidy and to calculate the subsidy and housing charges yearly.
5. Determine eligibility for supplementary Homeowner Grant.
6. Ensure safe evacuation of all household members in case of emergency and for security purposes.
7. Conduct a financial review before membership is accepted.
8. Comply with the co-op's operating agreement or program rules with CMHC (Canada Mortgage and Housing Corporation).
9. Decide on any request for an internal move.

I understand that the co-op will destroy personal information that it no longer needs:

1. One year after a decision was made for any information on inactive applicants.
2. Seven years for financial information on members.

I have read and received a copy of this statement.

All members of the household 19 years of age and older must sign this statement

Printed name	Signature	Date