

Apply Online!

You can apply to The Housing Registry online at:
<https://housingapplication.bchousing.org/>

Application Instructions

Step 1: Check if you are eligible.

Step 2: Complete, sign and date all sections of the application form.

Step 3: Gather and provide supporting documents.

Step 4: Submit your application by mail, fax, online or drop off at our office.

Step 5: Wait for our letter advising your application has been processed.

Completed applications with all supporting documents will be reviewed in the order they are received.

Applications submitted without required documents can be held for a maximum of 90 days.

Subsidized housing is long-term housing where the rent is calculated based on total household income. Housing Providers use The Housing Registry to select tenants when units become available. There are more people applying for housing than vacant units. It is not possible to predict when units may be available.

Who is Eligible?

You may be eligible for The Housing Registry program, if your household meets all the following conditions:

1. One the following household groups:
 - Family
 - Senior (55+)
 - Person with Disabilities
 - Single people or couples at risk of homelessness
2. Reside in British Columbia
3. Meet residency requirements
4. Below threshold for income and assets

For more information on eligibility, please see The Housing Registry website at www.bchousing.org or call The Housing Registry office at the numbers below.

Contact Us

101 – 4555 Kingsway
Burnaby, BC V5H 4V8

Toll-Free: 1-800 257-7756
Phone: 604 433-2218
Fax: 604 439-4729

Housing Providers may complete additional checks to assess a household's ability to uphold the obligations of a tenancy agreement.

These may include:

- Updated information on household members, income, and assets
- Reference checks
- Personal interviews
- Information from public sources such as Court Services Online and police websites
- Consent for a credit or criminal record check

Applicants may be required to sign a tenancy agreement and addendum covering topics on pets, parking, laundry, smoking, crime-free housing, etc.



Please do not submit original documents.

The Housing Registry
Subsidized Housing Application
Checklist

Required Documents:

- Proof of status in Canada for all household members**
 - Copy of Canadian birth certificate(s) or Canadian passport(s) if born in Canada.
 - If not born in Canada, please provide **one** of the following:
 - Record of Landing (IMM1000) or Confirmation of Permanent Residence (IMM5292/IMM5688); or
 - Permanent Residence Card (front/back); or
 - Any immigration document showing the date landed and the immigration code; or
 - Canadian Citizenship Card, Canadian Citizenship Certificate, or Canadian Passport; or
 - Refugee Claimant Form (IMM1442) or Notice of Decision.
- Proof of student status** for all adult children age 19 – 24 who are full-time students.

Suggested Documents:

Please note, housing providers may require the following documents below. Housing Providers may require additional information to process your application for housing.

- Proof of address and rent**
 - Copy of current rent receipt or recent rent increase notice; or
 - Copy of lease or tenancy agreement showing current rent amount.
- Proof of income or disability assistance** (required for all household members aged 19+)
 - If receiving income assistance or disability assistance from the Ministry of Social Development and Poverty Reduction: copy of cheque stub or confirmation of monthly assistance.
 - If employed: proof of **current** gross monthly income (last three consecutive cheque stubs or letter from employer).
 - Copies of cheque stubs, bank statements showing direct deposit of pensions, or other confirmation of income for any other income source.
- Proof of assets** (required for all household members aged 19+)
 - Copies of recent bank summaries and statements from all financial accounts clearly stating the account holder's name.
 - Property tax assessments for value of property owned and proof of outstanding mortgage(s).

Additional Documents (If Applicable)

- Copy of Notice to End Tenancy** (if you answered Yes to Question 9c).
Please submit an official form from the Residential Tenancy Branch (RTB). To get a copy of this form, call the RTB a 1-800 665-8779 or download it from www.gov.bc.ca/landlordtenant.
- Optional: Supplemental Application Form** only needs to be completed if you wish to receive extra consideration for:
 - Homelessness;
 - Health Condition affected by current housing; or
 - Fleeing abuse or violence.

The Supplemental Application Form is available online at www.bchousing.org or call The Housing Registry to have a copy sent by mail.

Submit application with supporting documents by:

Mail:
The Housing Registry
101 – 4555 Kingsway
Burnaby, BC V5H 4V8

Upload Documents Online:
Send saved PDF application and supporting documents digitally by visiting: www.bchousing.org/PUF

Fax:
604 439-4729

Please Print Clearly

| | |
|---------------------|-------|
| FOR OFFICE USE ONLY | |
| File: | Date: |

1. Applicant Information

List yourself and all potential household members for subsidized housing. If required, attach a separate sheet for more names.

| Last Name | First name(s) | Relationship to Applicant | Date of Birth (dd/mm/yyyy) | Gender Identity | Born in Canada? | Status in Canada? |
|-----------|---------------|---------------------------|----------------------------|-----------------|--|-------------------|
| | | Applicant | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

Please provide proof of status in Canada as stated in the checklist.

2. Residential Address *You must currently reside in British Columbia to be eligible for The Housing Registry.*

| | | | | |
|-------|----------|-------------|------|-------------|
| Apt # | Street # | Street name | City | Postal code |
|-------|----------|-------------|------|-------------|

Mailing Address *If different from home address.*

| | | | | |
|-------|----------|-------------|------|-------------|
| Apt # | Street # | Street name | City | Postal code |
|-------|----------|-------------|------|-------------|

3. Contact Information

| | | |
|---|------------------------|--|
| Cell phone ()-)- | Other phone ()-)- | Email |
| Optional: Name of person we can leave messages with | | Message person phone number ()-)- |
| Optional: Authorized contact* name and relationship to you | | Authorized contact phone number ()-)- |

Note: By providing an authorized contact, you are giving permission for BC Housing to exchange information with that authorized contact in order to maintain and update your Housing Registry file. To remove an authorized contact, please contact BC Housing.

4. Household Information (Optional)

Do you or anyone in your household identify as being an Indigenous person of Canada? Yes No

If yes, please select the option that best describes your Indigenous identity: First Nations Métis Inuit Other

Note: Question 4 is optional. Data is collected for planning and reporting purposes and does not impact eligibility for housing. However, housing providers with an Indigenous focus may give priority to applicants who have identified as being an Indigenous person in Canada.

5. Residence History

5a. Please provide information on where you have lived for the last five years. If required, attach a separate sheet.

| | | | | |
|--------------------------------|----------------|--------------|---------------|-----------------------|
| Current Address (street, city) | From (mm/yyyy) | To (mm/yyyy) | Landlord Name | Landlord Phone Number |
| Reason for Leaving: | | | | |

| | | | | |
|--------------------------------|----------------|--------------|---------------|-----------------------|
| Current Address (street, city) | From (mm/yyyy) | To (mm/yyyy) | Landlord Name | Landlord Phone Number |
| Reason for Leaving: | | | | |

| | | | | |
|--------------------------------|----------------|--------------|---------------|-----------------------|
| Current Address (street, city) | From (mm/yyyy) | To (mm/yyyy) | Landlord Name | Landlord Phone Number |
| Reason for Leaving: | | | | |

Please provide the suggested proof of address and rent documents as stated in the checklist.

5b. Have you or any members of your household ever lived in subsidized housing? Yes No

If so, list the name(s) on the tenancy: _____

Building name and/or address: _____

Note: Failure to declare past subsidized housing to subsidized housing providers may result in cancellation of your application. Past tenants with a debt may be required to either repay the debt or enter into a repayment agreement.

6. References (Optional)

Please include a reference that has observed your character over a reasonable amount of time.

Examples of character references are employer, past employer, pastor, outreach worker, or health worker.

| Name | Relationship | Phone Number |
|------|--------------|--------------|
| | | |
| | | |
| | | |

7. Asset Information

What is the total value of assets for adults (age 19 or older) in the household? \$ _____

Counted

- Stocks, bonds, term deposits, mutual funds and cash
- Real estate equity (net of debt)
- Business equity in a private incorporated company including cash, GICs, bonds, stocks or real estate equity
- TFSA

Not Counted

- Personal items such as vehicles, jewelry, and furniture
- Bursaries or scholarships from educational institutions for any household member that is a current student
- RRSP, RESP, RDSP, RRIF

Please provide the suggested proof of assets documents as stated in the checklist.

8. Income Information

8a. List all gross (before deductions) monthly income for household members aged 19 and older.
If required, attach a separate sheet.

| Name | Income Source (Income Assistance, employment, EI, pension, etc.) | Gross Monthly Income (\$) | Disability Income? |
|------|---|------------------------------|--|
| | | \$ | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | \$ | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | \$ | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | \$ | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | \$ | <input type="checkbox"/> Yes <input type="checkbox"/> No |

8b. Is any adult child (ages 19 – 24) a full-time student in the household? Yes No

Please provide required proof of full-time student status and suggested proof of income documents as stated in the checklist.

9. Current Accommodation

9a. Are you renting? Yes No

If you are renting, how much is your monthly rent payment? \$_____

9b. Please describe your current living arrangements.

- | | | |
|--|--|--|
| <input type="checkbox"/> House/Townhouse | <input type="checkbox"/> Apartment/Basement | <input type="checkbox"/> Manufactured Home/Trailer |
| <input type="checkbox"/> Sleeping Outside | <input type="checkbox"/> Staying with Family | <input type="checkbox"/> Staying with Friends |
| <input type="checkbox"/> Motel/Hotel | <input type="checkbox"/> Transition Home | <input type="checkbox"/> Second Stage Housing |
| <input type="checkbox"/> Care Facility or Treatment Centre | <input type="checkbox"/> Emergency Shelter | <input type="checkbox"/> Other:_____ |

9c. Have you received a legal Notice to End Tenancy? Yes No

If yes, when do you have to move by? _____

Please provide the Notice to End Tenancy form (if applicable) as stated in the checklist.

9d. Is there anything else that you want to share with a potential landlord about your current living situation?

10. Health and Mobility Information

10a. Do you, or any members of your household, have challenges with stairs?

I/We can do stairs I/We cannot do stairs I/We can only do a few stairs. How many? _____ steps

10b. Do you, or any member of your household use a: Wheelchair? **Yes** **No** Scooter? **Yes** **No**

If yes, who? _____ Used inside the home? **Yes** **No**

10c. Please only list health conditions or disabilities that would affect your housing needs.

| Name of Household Member | Health Condition or Disability |
|--------------------------|--------------------------------|
| | |
| | |
| | |
| | |

10d. Please describe any health concerns that are affected by your current housing.

10e. Please describe any special requirements or features that you may need in your housing (e.g. grab bars, near transit).

11. Housing Options

11a. Are you willing to live in a non-smoking/vaping free building and sign a non-smoking agreement? **Yes** **No**

11b. Would you live in a co-op? **Yes** **No**
(Must be willing to volunteer time and may include share purchase fees).

11c. Provide the following information for all household pets.

| Type | How Many? | Willing to Rehome? | Accredited dog under the "Guide Dog and Service Dog Act:" <input type="checkbox"/> Yes <input type="checkbox"/> No <small>Please submit proof of guide dog accreditation (if applicable).</small> |
|-------|-----------|--|--|
| Dog | | <input type="checkbox"/> Yes <input type="checkbox"/> All but one <input type="checkbox"/> No | |
| Cat | | <input type="checkbox"/> Yes <input type="checkbox"/> All but one <input type="checkbox"/> No | |
| Other | | <input type="checkbox"/> Yes <input type="checkbox"/> All but one <input type="checkbox"/> No | Describe: _____ |

12. Where do you want to live?

Please use the Housing Listings to tell us where you would like to apply.

The Housing Listings are available online at www.bchousing.org/housinglistings. You can also request a physical copy of the Housing Listings by phone at 604 433-2218 (Lower Mainland) or 1-800 257-7756 (Toll-Free).

The Housing Listings provide details on each building in The Housing Registry and Housing Registry Code. Write The Housing Registry Code from the Housing Listings below to select the buildings for your application.

When selecting buildings, please be aware that The Housing Registry has a two refusal policy. If you refuse two offers of housing, your application to The Housing Registry will be cancelled. Please be careful when selecting buildings and be sure you are prepared to live in any of the buildings or areas that you list.

For more information please visit www.bchousing.org/housinglistings.

Option #1: Buildings.

From the Housing Listings, please record "The Housing Registry Code" for each of the buildings you are interested in (e.g.: 190, ABD).

If the building does not have a Housing Registry Code, you will need to contact the building directly to apply.

Option #2: Cities or Towns.

From the Housing Listings, please record the cities/towns you are willing to live in (e.g.: Burnaby, Kelowna).

13. Optional Supplemental Application (If Applicable)

Some housing providers that use The Housing Registry to fill available units may give additional consideration to applicants who:

- are homeless;
- are fleeing domestic violence or abuse; or
- have a serious health condition that is affected by current housing.

Applicants who meet these criteria can have a Supplemental Application Form completed by a third-party verifier familiar with their situation. Please find a list of appropriate potential verifiers within the supplemental form.

For more information or to download the supplemental form, visit www.bchousing.org or call the number below for a copy.

Please provide the supplemental form (if applicable) as stated in the checklist.

PLEASE READ AND SIGN

I/We declare:

- This is my/our application; and
- All the information in it is correct and complete to the best of my/our knowledge.

I/We permit:

- The Housing Registry to make any inquiries that are necessary to verify the information given in this application;
- Any person, corporation or social agency to release to The Housing Registry any information pertinent to the assessment of my/our application;
- Members of The Housing Registry to receive and exchange with credit bureaus and my/our previous landlords' credit and other tenancy information about me/us, to be used in the decision-making process to provide me/us with housing;
- The Ministry of Social Development and Poverty Reduction to release information to The Housing Registry regarding my/our income

I/We understand:

- That, in accordance with section 33.2 (a) of the Freedom of Information and Protection of Privacy Act, the information on this application may be shared with other affordable housing providers in order to increase my/our opportunities for rent-geared-to-income housing;
- That this application is not an agreement on the part of The Housing Registry or its members to provide me/us with housing;
- That if I/we refuse two offers of housing, my/our application will be cancelled;
- That if I/we are being considered for an available unit, housing providers will gather additional information in order to assess my/our ability to uphold the obligations of a tenancy agreement and it is my/our responsibility to provide or cause to be provided information requested to assist with this assessment;
- That it is my/our responsibility to tell The Housing Registry of any changes to the information given in this application and to provide any supporting documents required;
- That false information given by me/us may result in my/our application being cancelled from consideration;
- That if I/we have deliberately worsened my/our current housing situation (e.g., terminated a tenancy for no reason) that my/our application may not be accepted or my/our current living situation may not be taken into consideration.

This application must be signed by all household members age 19 and older.

| | | |
|------------------------------------|-----------------------------------|------|
| Print Name of Applicant | Signature of Applicant | Date |
| Print Name of Additional Applicant | Signature of Additional Applicant | Date |
| Print Name of Additional Applicant | Signature of Additional Applicant | Date |
| Print Name of Additional Applicant | Signature of Additional Applicant | Date |

Purpose of this form: This form collects personal information for contact purposes and to determine eligibility for subsidized housing through The Housing Registry. The information is collected in accordance with section 26(c) of the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection of your information, please call 604 433-1711 and ask to speak to BC Housing's Privacy Officer or write to Privacy Officer, BC Housing 4555 Kingsway, Burnaby, BC, V5H 4V8.