**APPLICATION FORM FOR POTENTIAL MEMBERSHIP AT: QUARRY CO-OPERATIVE INC**

Phase I Phase II

3275 McCarthy Road Phone:613-523-1890 3339 Paul Anka Drive

Ottawa, Ontario Ottawa, Ontario

This membership application is in **two parts** in order to ensure that the confidentiality of the information provided is respected. The first part contains financial information and references that are only accessible to our staff. The second part asks for information on your household: This will be used by the membership committee when assessing your suitability for membership into our community.

Please note that if you and your family are approved for membership, each person over the age of 16 would need to pay a one-time membership fee of $25 each. Please have a certified cheque or money order made out to Quarry Co-op Inc. These funds are none refundable.

Please return the completed application and documentation to:

Quarry Co-op

51 - 3275 McCarthy Road

Ottawa, ON K1V 9M8

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**PART 1:**

**Household Composition: PLEASE PRINT CLEARLY IN CAPITAL LETTERS**

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| --- | --- |
| **Main Applicant** | **Co-Applicant** |
| Full Name: | Full Name: |
| Date of Birth (yy/mm/dd): | Date of Birth (yy/mm/dd): |
| Present Address: | Present Address: |

|  |  |
| --- | --- |
| Telephone Numbers: | Telephone Numbers: |
| Home: | Home: |
| Work: | Work: |
| Cell: | Cell: |
|  |  |
| Email address: | Email address: |
|  | Relationship to the main applicant: |

**Size of accommodation required: Circle one**

One Bedroom Two Bedroom Three Bedroom Four Bedroom

**Occupancy**

On what date do you require accommodation? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Do you have any pets?** Yes/No

If yes, what kind and how many\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REFERENCES AND FINANCIAL INFORMATION**

**NOTE: We will be contacting your current landlord and, if necessary, your past landlord with respect to this application.**

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| **Main Applicant** | **Co-Applicant** |
| How long have you lived at your present residence? | How long have you lived at your present residence? |
| Do you own your present residence (please circle)? Yes/NoIf yes, how much is your mortgage, taxes, utilities, condo fees etc per month:  | Do you own your present residence (please circle)? Yes/NoIf yes, how much is your mortgage, taxes, utilities, condo fees etc per month:  |
| Do you rent your present residence (please circle)? Yes/NoIf yes, what is your rent per month | Do you rent your present residence (please circle)? Yes/NoIf yes, what is your rent per month |
| Is heat and hydro included in your rent (please circle)? Yes/NoIf no, how much do you pay for heat and hydro per month: | Is heat and hydro included in your rent (please circle)? Yes/NoIf no, how much do you pay for heat and hydro per month: |
| Current Landlord Name:Phone Number:Address: | Current Landlord Name:Phone Number:Address: |
| If you have lived at your present address **less than two years** please provide the name, address and telephone number for all places you have lived in the **last two years** | If you have lived at your present address **less than two years** please provide the name, address and telephone number for all places you have lived in the **last two years** |
|  **EMPLOYMENT HISTORY**  |
| **MAIN APPLICANT** | **CO-APPLICANT** |
| Are you (please circle):Employed Yes NoUnemployed Yes NoReceiving benefits Yes No | Are you (please circle):Employed Yes NoUnemployed Yes NoReceiving benefits Yes No |
| Occupation: | Occupation: |
| Current Employer's Name:Phone Number:Address: | Current Employer's Name:Phone Number:Address: |
| Length of present employment: | Length of present employment: |
| If present employment is 1 year or less, give previous employer’s name, address and telephone number: | If present employment is 1 year or less, give previous employer’s name, address and telephone number: |
| Gross annual income: | Gross annual income: |

If you have more than one income, please provide the above details for each additional income that you have.

**Income Verification Policy**

1. If you are regularly employed, please submit one of the following:
* a confirmation letter from your employer stating your gross wages and hours, or annual salary and overtime pay in the last 12 months;

OR

* three consecutive pay stubs with the pay period, your name and your Social Insurance Number noted on each.
1. If you are receiving social assistance, please submit:
* a letter from your case worker or the social agency, indicating the size of your family and your monthly benefits.
1. If you receive a pension, adult training allowance, workers’ compensation or other regular income, please submit either:
* a confirmation letter plus your T4 and Income Tax Assessment.
1. If you are self-employed, please submit either:
* a letter of financial statement from a chartered accountant, indicating the annual net income from your business and total withdrawals from your business as personal salary in the last year;

OR

* a statutory declaration, sworn before a notary public, of your earnings in the last 12 months and projected earnings for the next 12 months. This declaration must be accompanied by a copy of your last income tax return and information slips.
1. If you are irregularly or seasonally employed, please submit:
* a copy of your last income tax return and information slips, as well as a confirmation letter from your current employer (or copies of your unemployment insurance warrant cards), and an estimate of your earnings for the next 12 months.
1. If you are currently unemployed, please submit:
* copies of your unemployment insurance warrant cards.

**PART 2: HOUSEHOLD INFORMATION**

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| **What is your family composition? List everyone that will be residing in the unit.** |
| Name | Sex | Date of birth(yy/mm/dd) | Relationship to the main applicant |
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**General Information:**

a) How did you hear about Quarry Co-op? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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b) Have you lived in a housing Co-op before (please circle)? Yes/No

If yes, name of the Co-op, length of membership and reason for leaving\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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c) Why do you want to become a member of Quarry Co-op? \_\_\_\_\_\_\_\_

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d) Have you ever been involved in any form of a Co-operative before or a credit union (please circle)? Yes/No

 If yes, give details. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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e) Are you, or have your ever been, involved with any other volunteer organizations such as a community group, service club or trade union (please circle)? Yes/No

 If yes, give details. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 **Please list the skills, interests, hobbies or experience which you can contribute to the operation of Quarry Co-op.**

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**DECLARATION**

1/We hereby apply for membership of Quarry Co-operative Incorporated.

I/We understand that this application must be accompanied by proof of income in a form acceptable to the Co-op for each member of the household 18 years of age or over who receives income.

I/We understand that Quarry Co-op is formed for the purpose of providing housing at cost to its members and that membership in the Co-op includes the responsibility to participate a minimum of two hours per month in the running of the Co-op.

I/We understand that only people accepted for membership in Quarry Co-op may live in the Co-op.

I/We understand that if accepted for membership and offered and accept a unit in the Co-op, a onetime member deposit of $1250 will be required prior to moving in.

I/We declare that all the information provided in this application is true and correct in every respect. I authorize the Co-op to check and verify the information provided in this application and to perform a credit check. I authorize Quarry Co-op to contact my current and/or previous landlord for a landlord reference check.

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Name of Applicant (please print) Name of Co-Applicant (please print)

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Signature of Main Applicant Signature of Co-Applicant

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Date Date



Declaration of Income

The co-op has advised me of the following:

* The operating agreement between the co-op and Canada Mortgage and Housing Corporation states that the co-op may not accept new households whose annual income is higher than the income ceiling CMHC sets for the year.
* This ceiling is set at the 2nd quintile of household income as found in the most recent Survey of Household Spending in the Province of ON published by Statistics Canada.
* In 2018 the maximum income for an applicant household is $81,400.

I am applying for membership at the co-op and declare the following:

* My annual household income is $ \_\_\_\_\_\_\_\_\_\_\_\_\_

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|  |
| Name of Applicant - print |
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|  |
| Signature of Applicant |
|  |
|  |
| Date |