

Information Session Date: \_\_\_\_\_  
 Application Number: \_\_\_\_\_ Certified by: \_\_\_\_\_

## BRIDLE MANOR CO-OPERATIVE INC.

### Membership and Housing Application

**Please print clearly. If you run out of room, use another sheet.**

#### Who is applying?

You must list **everyone** in your household.  
 Please give a complete mailing address, including postal code.

#### Adult A:

Family Name:  First Name: Middle Name:  <div style="text-align: right;">Female <input type="checkbox"/> Male <input type="checkbox"/></div>	Mailing Address:    
Home Phone Number: Work Phone Number: Email Address:	Date of Birth:  Social Insurance Number:

#### Adult B:

Family Name:  First Name: Middle Name:  <div style="text-align: right;">Female <input type="checkbox"/> Male <input type="checkbox"/></div>	Mailing Address:    
Home Phone Number: Work Phone Number: Email Address:	Date of Birth:  Social Insurance Number:

#### Children (17 years old or younger):

Family Name: First Name:  <div style="text-align: right;">Female <input type="checkbox"/> Male <input type="checkbox"/></div> Dependent: Yes <input type="checkbox"/> No <input type="checkbox"/>	Family Name: First Name:  <div style="text-align: right;">Female <input type="checkbox"/> Male <input type="checkbox"/></div> Dependent: Yes <input type="checkbox"/> No <input type="checkbox"/>
Date of Birth:	Date of Birth:

Family Name: First Name:  <div style="text-align: right;">Female <input type="checkbox"/> Male <input type="checkbox"/></div> Dependent: Yes <input type="checkbox"/> No <input type="checkbox"/>	Family Name: First Name:  <div style="text-align: right;">Female <input type="checkbox"/> Male <input type="checkbox"/></div> Dependent: Yes <input type="checkbox"/> No <input type="checkbox"/>
Date of Birth:	Date of Birth:

Are you currently expecting any new children in your family? Yes  No

**What type of unit do you need?**

Please write the number “1” beside your first choice and the number “2” beside your second choice.

	One Bedroom Apartment		Two Bedroom Apartment
	Three Bedroom Townhouse		Four Bedroom Townhouse

**Parking:**

There will be an extra charge for parking. Will you need parking? Yes  No

License Plate #: \_\_\_\_\_ Make/Model/Colour: \_\_\_\_\_

**Where have you lived before?**

How many years or months have you lived at your present address?

Years: \_\_\_\_\_ Months: \_\_\_\_\_

Rent:  Own:

If you have lived there less than two years, please tell us where you have lived before:

Previous Address:	Previous Address:
Length of Stay:	Length of Stay:
Rent: <input type="checkbox"/> Own: <input type="checkbox"/>	Rent: <input type="checkbox"/> Own: <input type="checkbox"/>

How much rent or mortgage do you pay each month? \_\_\_\_\_

If you pay extra for utilities, how much do you pay? \_\_\_\_\_

How much notice do you need to give to move out of your current residence?

May we contact your present landlord for a reference? Yes  No

Please give us the name and phone number of your landlord. If you **do not** want us to contact your landlord, please explain why when you send in this application.

Landlord’s Name:
Address:
Phone Number:

**Pets:**

Bridle Manor Co-operative Inc. allows only one uncontained pet in each townhouse unit.

**No uncontained pets are allowed in the apartment building at all.**

Please tell us if you will be bringing a pet into the Co-op and what it is: \_\_\_\_\_

**General Information:**

How did you hear about the Co-op?

- from a friend or relative
- from the Co-op Housing Phone Line
- from the website – [www.coophousing.com](http://www.coophousing.com)
- other – please specify: \_\_\_\_\_

Why do you want to live in the Co-op?

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Have you ever been involved in any other Co-op? If yes, give details.

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Are you now or have you ever been, a member of any other volunteer organization such as a community group, service club or trade union? If yes, give details.

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**Volunteer Participation:**

All Co-op Members are expected to volunteer some time to the running of the Co-op. Please specify the area of interest for each applicant. Please note your first “1” and second “2” preference.

Choice	Adult A	Choice	Adult B
	<b>Member Selection</b>		<b>Member Selection</b>
	<b>Finance</b>		<b>Finance</b>
	<b>Maintenance</b>		<b>Maintenance</b>
	<b>Social</b>		<b>Social</b>
	<b>Gardening</b>		<b>Gardening</b>

**About your total household income:**

We need to know about everyone’s income. Please give the before-tax income (gross income) per month. **All information will be kept confidential.**

Name of each person in Household over 18 years of age	Employer or Other Source of Income (for example: child support, pension)	Gross Amount per Month

**You need to include the proof of income information listed for each person over 18 with your application.**

**Credit Check:**

Attached is the “**Collection, Use and Disclosure of Information**” section.

The word “*Information*” means credit information, personal information, information about the services you use that are provided by Bridle Manor Co-operative Inc. as listed in this Membership and Housing Application, and information relating to your tenancy at Bridle Manor Co-operative Inc., as applied for in this application including information regarding the duration of your tenancy, monthly rent, emergency contacts and any matters relating to your lease/tenancy agreement, including misrepresentations relating to, defaults under and/or breaches of your lease/tenancy agreement.

“*Credit Information*” means information about you, including your name, age, date of birth, occupation, place of residence, previous places of residence, occupancy length, marital status, co-occupant’s/spouse’s/same-sex partner’s name and age, number of dependents, particulars of education or professional qualifications, field of employment, places of employment, previous places of employment, employment durations, estimated income, paying habits, outstanding debt obligations, cost of living obligations, involvement in bankruptcy proceedings or landlord and tenant disputes, assets, and banking information (including account and credit card information).

“*Personal Information*” means information about you other than credit information that is relevant to your suitability as a member/tenant, including your social insurance number, driver’s license number, vehicle license plate number, vehicle make and year, and information from references which you provide about your character, reputation, physical or personal characteristics or mode of living or about any other matter concerning you that is relevant to your suitability as a member/tenant.

## Collection, Use and Disclosure of Information:

In consideration of **Bridle Manor Co-operative Inc.** accepting you as a member/tenant and entering into a membership/tenancy agreement with you, you expressly consent to and authorize the following:

1. Bridle Manor Co-operative Inc. may obtain information about you through a tenant check and/or credit or consumer report conducted by Rent Check Credit Bureau and as permitted or required by law. You expressly authorize Rent Check Credit Bureau to provide information regarding you to Bridle Manor Co-operative Inc.
2. Bridle Manor Co-operative Inc. may use information about you to determine your suitability as a member/tenant and as permitted or required by law.
3. Bridle Manor Co-operative Inc. may disclose information about you as permitted or required by law and to Rent Check Credit Bureau in order to be included within a database of tenant information, and/or within a file on you, for purposes of:
  - tenant reporting and credit reporting in accordance with the *Consumer Reporting Act* (Ontario)
  - establishing a credit history and a rental history
  - comparing with aggregate statistical data for purposes of tenancy and credit scoring; and
  - supporting the credit approval process
4. You expressly authorize Rent Check Credit Bureau to retain information regarding you indefinitely for the purposes outlined in section 3 above, subject to any applicable legal restrictions.
5. You expressly authorize Rent Check Credit Bureau to disclose information regarding you to its members and subscribers as required or permitted by law and for the purposes outlined in section 3 above.
6. You agree that you will not withdraw your authorization and consent to the collection, use and disclosure of information about you by Rent Check Credit Bureau as outlined in sections 1 to 5 above.
7. You agree that all statements on this Membership and Housing Application are true and you expressly authorize all references given to release information about you to Bridle Manor Co-operative Inc. for verification subject to sections 1 to 5.

Please provide your consent by checking the following box and signing in the appropriate space below:

Yes, I have read and agree to the collection, use and disclosure of information as outlined above.

Yes, I have read and agree to the collection, use and disclosure of information as outlined above.

I have read, understood and voluntarily agree to the terms and conditions outlined above.

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\_\_\_\_\_ X  
**Applicant's Signature**

\_\_\_\_\_ X  
**Co-Applicant's Signature**

\_\_\_\_\_ X  
**Print Name**

\_\_\_\_\_ X  
**Print Name**

\_\_\_\_\_ X  
**Date**

\_\_\_\_\_ X  
**Date**

**Signatures:**

We understand that only members of Bridle Manor Co-operative Inc. may live in the Co-op and we wish to apply for membership in the Co-op.

We understand that Bridle Manor Co-operative Inc. provides housing at cost to its members.

We understand that the Co-op expects us to share in the responsibility of running the Co-op.

We understand that all members of the household over 18 must be interviewed and that we can become members only if the Co-op accepts us. Applying does not guarantee that we will be accepted and the \$30.00 application fee per adult (over 18) is used for the credit check and is non-refundable.

We understand that, if accepted for membership and offered a unit, we must pay a one-time membership fee of \$25.00 per adult (over 18).

We declare that all the information in this application is true and correct. We give Bridle Manor Co-operative Inc. permission to verify any or all of the information we provided.

Signatures of everyone over age 18 who is applying:

Name:

Date:

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<p><b>Mail your completed application to:</b></p> <p><b>BRIDLE MANOR CO-OPERATIVE INC.</b></p> <p><b>Unit 101, 3110 Sheppard Avenue East</b></p> <p><b>Scarborough, Ontario M1T 3J8</b></p>
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