

Habitat Morin-Heights, Morin-Heights

# **Housing Application Form**

## Identification of the Tenant(s):

Name:		First Name:	
Date of birth:	Age:	ealth insurance number:	
Email:			

Name:		First Name:	
Date of birth:	Age:	Health insurance number:	
Email:			

#### **Current Residency Information:**

Address of your residence (Street and housing number):				
City:	Postal Code :			
How long have you been living at this address?				
Phone Numbers:	Other Phone Numbers:			





### Habitat Morin-Heights, Morin-Heights

Person's status:					
Currently you are:	$\Box$ Landlord	□ Tenant			
<b>If you are curren</b> home?	tly a homeowne □ Yes	<b>r</b> , do you need to sell your home before moving into your new $\Box$ No			
Emergency contact	t:				

Phone Number:

#### **Eligibility Criteria for Projects with Services:**

#### Please check the item(s) that apply to your current situation. My spouse or I or both:

 $\Box$  we are aged 75 and over, or with loss of autonomy (requires services such as supervision, meal preparation)

□ Have disabilities that interfere with domestic activities (buying food, preparing meals, doing laundry, etc.).

 $\Box$  We experience a feeling of insecurity that hinders our well-being (isolation, fear, constant need for support).

□ We have difficulty getting around (e.g., using a wheelchair).

 $\hfill\square$  Are interested in some self-help activities. Specify:

 $\hfill\square$  We are currently receiving home care. Specify:



Link:



Habitat Morin-Heights, Morin-Heights

## Availability of the person interested in occupying the accommodation:

When would you be ready to occupy the property: $\Box$ Immediately							
	□ Starting at:						
Moving period:							
□ Weekdays □ Weeke		ends					
Other information:							
Do you own a car?	Yes		No				
Do you use a scooter?	Yes		No				
Do you use a portable air conditioner?	Yes		No				
Signature:	D	ate:					
You can submit this document in person at Morin-Height City Hall;							
By e-mail at the following address:							
By mail: Groupe Logiloge, 3675 Chanoine-Moreau, Bur. 211							
Trois-Rivières, Quebec G8Y 5M6							
*If your gross household income meets the maximum allowable amount, which is \$35,000/year, you may be eligible for the <i>rent supplement program</i> to reduce the price of your rent.							
In this case, please complete the Application for Low-Rent Housing form							

