Request for Application

1546 Kingston Road, B4
Scarborough, ON M1N 1R8
Phone: 416-690-5036
Fax:
Email: kalmarco-operative@rogers.com

QUALIFICATIONS:

Kalmar Cooperative is a Federal non-profit housing complex. To qualify for housing in Kalmar you must be a Canadian citizen, or have permanent landed immigrant status in Canada. You must also have a responsible housing history record. You will be required to verify this information about all household members.

INCOME:

Your combined household income **CANNOT exceed $84,536 per year** upon the assignment of a housing unit within Kalmar Cooperative Inc. Households with incomes over the income ceiling will not qualify. There is no income threshold, no low limit. But you must demonstrate an ability to pay housing charges (rent) in a timely manner.

The Kalmar complex consists of one and two bedroom apartments only.
I am looking for a ◯ one bedroom ◯ two bedroom ◯ I require parking
Number of persons that will occupy a unit _____Adults _____Children

Name (1)_____ _____ _____
FIRST **MIDDLE** **LAST**

SIN_____/ _____/_____ **Date of Birth** _____/_____/_____
DD MMM Year

Name (2)_____ _____ _____
FIRST **MIDDLE** **LAST**

SIN_____/ _____/_____ **Date of Birth** _____/_____/_____
DD DD MMM Year

Present Address **Previous address if less than 2 years**

Street	APT		Street	APT	
City/Province			City/Province		
Postal Code		Phone	Postal Code		Phone
Landlord			Landlord		
Landlord Ph			Landlord Ph		

Income per Month (ADULT 1) *(Your combined household income CANNOT exceed $84,536)* **Income per Month (Adult 2)**

Employment		Child Tax Credit		Employment		Child Tax Credit	
Pension		Other		Pension		Other	
CPP/ Disability		Other		CPP/ Disability		Other	
TOTAL Monthly Income $				**TOTAL Monthly Income $**			

I /WE herein authorize Kalmar Co-operative Inc., and/or its agents from time to time, to obtain verification of the above information that I have provided in good faith. I understand that this information will be used for the sole purpose of qualifying me for housing in the Kalmar Co-operative Inc., and for no other purpose.

Signed this _____of _____, 2_____

_____ / _____
Signature (Applicant) Signature (Applicant 2)