

I HAVE READ THE INCLUDED INFORMATION SUMMARY IN ITS ENTIRETY

PLEASE ANSWER ALL QUESTIONS

**Non-Refundable**  
**APPLICATION FEE**  
**\$50 per adult applicant**

*Payment to accompany application.*  
**By ettransfer or Bank Draft to**  
*Hi-Wood Meadows Housing Co-op Ltd.*

**1. APPLICANT**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Female  Male  Prefer not to say  Date of Birth \_\_\_\_\_

Social Insurance Number \_\_\_\_\_

Current Address (**Including Postal Code**)

\_\_\_\_\_  
\_\_\_\_\_

Phone (Home) \_\_\_\_\_ Phone (Work) \_\_\_\_\_

E-mail \_\_\_\_\_

**2. CO-APPLICANT**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Female  Male  Prefer not to say  Date of Birth \_\_\_\_\_

Social Insurance Number \_\_\_\_\_

Current Address (**Including Postal Code**)

\_\_\_\_\_  
\_\_\_\_\_

Phone (Home) \_\_\_\_\_ Phone (Work) \_\_\_\_\_

E-mail \_\_\_\_\_

3. List all persons, **INCLUDING YOURSELF**, who will be living with you should this application be approved.

LAST NAME	FIRST NAME	RELATIONSHIP	DATE of BIRTH (month/day/year)	Male/ Female	OCCUPATION

LAST NAME	FIRST NAME	RELATIONSHIP	DATE of BIRTH (month/day/year)	Male/ Female	OCCUPATION

4. Are all persons listed above Canadian Citizens?    Yes            No

**If no, provide copies of documents for all persons, including yourself, verifying all individuals listed above have been lawfully admitted into Canada. \*To qualify to submit an application, applicants must be a lawfully permitted to reside in Canada.**

5. Have you declared bankruptcy?            Yes            No

If yes, how many times? \_\_\_\_\_ Dates of Bankruptcy \_\_\_\_\_

Have you been discharged?            Yes            No    If yes, date of discharge. \_\_\_\_\_

***Please provide a copy of your discharge.***

**6. UNIT TYPE**

What kind of accommodation are you looking for?

Apartment -        one bedroom            two bedrooms

Townhouse -        two bedrooms            three bedrooms

Do you have mobility issues?        Yes            No

If yes, what type of accommodation do you need arising from your mobility issue? \_\_\_\_\_

\_\_\_\_\_

\*Note the Co-op is independent living and any assistance with daily living is the responsibility of the member.

Is someone in the household a smoker?        Yes            No    **\*Smoking is not permitted inside the unit.**

The members have approved the Co-op going smoke-free. The direction and timing will be determined.

**The applicant/co-applicant understands that if they decide to move out of the Co-op, prior to having lived there for one year, they will be required to pay an early move-out penalty per our Policies.**

Initials \_\_\_\_\_

**7. HOUSING BACKGROUND**

How long have you lived at your current address? \_\_\_\_\_

If you have lived there less than 2 years, please give your previous address and phone number of landlord.

\_\_\_\_\_  
\_\_\_\_\_

Do you rent or own your present accommodation?      Own      Rent

If you rent, Name, Address and Phone number of Landlord.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

What is your present accommodation:      House      Townhouse      Apartment

Other, \_\_\_\_\_

Present housing charge/ payment is \$ \_\_\_\_\_ per month, \$ \_\_\_\_\_ for heat,  
\$ \_\_\_\_\_ for power and \$ \_\_\_\_\_ for water and sewer. \$ \_\_\_\_\_ other.

***If renting, please provide a letter of reference from your current landlord.***

**8. Have you ever lived in a Co-op before?      Yes      No**

If yes, please give name and address:

Name of Co-op: \_\_\_\_\_

Address of Co-op: \_\_\_\_\_

Date you lived at Co-op: \_\_\_\_\_

Involvement: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**9. Reasons for wanting to move to this Co-op \_\_\_\_\_**

\_\_\_\_\_

**10. PET POLICY**

The Co-op has a current Pet Policy that subject to Board approval, allows **TWO** small permitted animals in each townhouse and **ONE** small permitted animal in each apartment.

**Please inquire with the office on types of permissible pets per the Policy.**

**THE MAXIMUM SIZE OF A FULL-GROWN DOG FROM THE BASE OF THE NECK TO THE FLOOR CANNOT BE MORE THAN 18 INCHES.**

**If approved, dogs must have current Town of High River license and dogs and cats must have shots up to date and must be spayed/ neutered, when age appropriate.**

**A NON-REFUNDABLE PET FEE IS DUE FOR APPROVED PETS PRIOR TO MOVE IN.**

Initials \_\_\_\_\_

Do you have a pet?        Yes        No

If yes, what kind and how many of each: \_\_\_\_\_

**11. PARKING**

List all vehicles belonging to the household. Please note that each Townhouse unit has two parking stalls and the Apartment units have one parking stall.

<b>OWNER OF VEHICLE</b>	<b>MAKE/MODEL/YEAR</b>	<b>COLOUR</b>	<b>PLATE NUMBER</b>

**12. STATEMENT OF INCOME**

NOTE: ALL INFORMATION REGARDING YOUR FAMILY’S INCOME MUST BE COMPLETE AND ACCURATE. PROVIDE DETAILS OF CURRENT EMPLOYMENT HELD IN THE LAST TWELVE (12) MONTHS BEGINNING WITH THE MOST RECENT EMPLOYER. PLEASE GIVE US THE MONTHLY BEFORE-TAX INCOME (GROSS INCOME) OF EACH HOUSEHOLD PERSON OVER THE AGE OF 18.

**Please provide the following:**

- **A copy of your current tax Notice of Assessment you receive back from Revenue Canada for the most recent tax year.**
- **A letter from current employer confirming employment and salary.**
- **A copy of last two (2) pay stubs, or if retired, proof of pension income.**

**12. STATEMENT OF INCOME (cont'd)**

**Applicant** \_\_\_\_\_

<b>Employer Name (Other Income: including AISH, Income Support / Child / Spousal Support, Disability, Pension, etc.)</b>	<b>Employer Address</b>	<b>GROSS MONTHLY</b>	<b>START DATE</b>	<b>END DATE (or current)</b>	<b>Hours per Week</b>

**Co-Applicant** \_\_\_\_\_

<b>Employer Name (Other: including AISH, Income Support / Child / Spousal Support, Disability, Pension, etc.)</b>	<b>Employer Address</b>	<b>GROSS MONTHLY</b>	<b>START DATE</b>	<b>END DATE (or current)</b>	<b>Hours per Week</b>

**Other Household Persons (18 and over)** \_\_\_\_\_

<b>Employer Name (Other: including AISH, Income Support / Child / Spousal Support, Disability, Pension, etc.)</b>	<b>Employer Address</b>	<b>GROSS MONTHLY</b>	<b>START DATE</b>	<b>END DATE (or current)</b>	<b>Hours per Week</b>

**Retired Applicant** \_\_\_\_\_

<b>PENSION INCOME</b> (including AISH, Income Support, Alimony, etc.)	<b>GROSS MONTHLY</b>
CPP	
Old Age	
Other	

**Retired Co-Applicant** \_\_\_\_\_

<b>PENSION INCOME</b> (including AISH, Income Support, Alimony, etc.)	<b>GROSS MONTHLY</b>
CPP	
Old Age	
Other	

**Self Employed** \_\_\_\_\_

*Please attach a copy of your audited financial statement for the most current fiscal year.*

<b>NAME OF COMPANY</b>	<b>ADDRESS</b>	<b>MONTHLY PERSONAL SALARY WITHDRAWALS</b>	<b>RETAINED EARNINGS OR NET INCOME OF BUSINESS</b>

**13. CO-OP INFORMATION**

The applicant/co-applicant understands that volunteering is a requirement of all approved members residing within the Co-op.

**Applicant(s) Initials** \_\_\_\_\_

The applicant/co-applicant understands that they may have to supply a Doctor's Certificate stating that they are capable of living on their own (which may include assistance with daily tasks at their own expense), maintaining their housing accommodation (which may be assisted at their own expense), and can operate household equipment (which may be assisted at their own expense), and that they are of not at risk of causing harm to other members or staff at the Co-op. If the Board reasonably determines that a member is at risk of causing harm to other members or staff at the Co-op, a meeting will be scheduled to discuss this matter and further action may be necessary.

**Applicant(s) Initials** \_\_\_\_\_

The applicant/co-applicant acknowledges that they have read the Information Summary provided with this application and agree to the requirements of members. Complete details are contained in the Co-op's By-laws, Policies and Housing Agreement. If you require more information prior to signing the application, please contact the Office.

**Applicant(s) Initials** \_\_\_\_\_

**ACCEPTANCE INFORMATION**

If the application is approved by the Board of Directors and a unit is available and accepted in writing by the applicant / new member, half of the Share Purchase amount (non-refundable) must be provided to the Office by guaranteed funds within 48 hours. The remainder of the Share Purchase must be paid in full before the member receives keys or takes occupancy unless other arrangements are made and approved by the Board. The current Share Purchase is \$2,500; \$1,250 due upon acceptance of offered unit and \$1,250 due upon occupancy.

**Applicant(s) Initials** \_\_\_\_\_

**SIGNATURES**

We understand that only members of Hi-Wood Meadows Housing Co-op Ltd. may live in the Co-op and we apply for membership.

We understand that by applying for membership we must pay an application fee to cover the costs involved in processing our application and that payment is due upon submission of the application and is non-refundable.

We declare that all information in this application is correct and we give the Co-op permission to:

- verify any and all of this information;
- perform a landlord check;
- perform credit check(s) for application purposes and for being approved on the board of directors,
- bankruptcy checks as required.

Applicant (s) Initials \_\_\_\_\_

**SIGNATURES OF ALL HOUSEHOLD MEMBERS OVER 18 YEARS OF AGE:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

## DECLARATION OF TOTAL HOUSEHOLD INCOME

Our Operating Agreement states that Hi-Wood Meadows Housing Co-op may not accept new household applicants whose annual income is higher than the income ceiling CMHC sets for the year, which currently is set at the income of \$141,060.<sup>00</sup>.

I/We hereby declare that my/our total household income (before taxes) does not exceed the above-noted ceiling amount. This includes everyone in the household who is at least 18 years old.

I/We make this Declaration conscientiously believing it to be true and knowing it is of the same force and effect as if made under oath.

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Signature – Applicant

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Date

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Signature – Co-Applicant

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Date

**HI-WOOD MEADOWS HOUSING CO-OP LTD.**

**PRIVACY STATEMENT**

**Hi-Wood Meadows is committed to protecting the privacy, confidentiality, accuracy and security of the personal information we collect, use and retain.**

**The information we collect includes:**

- ❖ **Contact information (address, telephone numbers)**
- ❖ **Household size and composition**
- ❖ **Household income**
- ❖ **Place of employment**
- ❖ **Previous housing situation**
- ❖ **Housing charge payment record**
- ❖ **Credit report/rating**
- ❖ **Age and gender**
- ❖ **Medical information**
- ❖ **Any incidence of property damage**
- ❖ **Complaints filed by other concerning the household**
- ❖ **Social Insurance Number**
- ❖ **Income Tax**

**This personal information may be made available to the following, if necessary:**

- ❖ **The Board of Directors**
- ❖ **Lawyers**
- ❖ **Collection Agencies**
- ❖ **RCMP**
- ❖ **Emergency contacts**
- ❖ **The Co-op auditor**
- ❖ **Medical related agencies**
- ❖ **Homecare**
- ❖ **Reference purposes**
- ❖ **Landlord checks**

**We will not share your personal information except as stated above. Maintaining the security of your personal information is a top priority. Only authorized personnel have access to your information.**

\_\_\_\_\_  
**Signature - Applicant**

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

\_\_\_\_\_  
**Signature - Co-Applicant**

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

<h2>DECLARATION</h2>
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I declare that all the information in this application is correct and hereby authorize the Co-operative to verify any or all of the information contained herein, and to perform a credit check.

And I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of the “Canada Evidence Act”.

Declared before me at the \_\_\_\_\_ }  
of \_\_\_\_\_ }  
Signature of Applicant

in the Province of Alberta, this \_\_\_\_\_ }  
day of \_\_\_\_\_, \_\_\_\_\_ }  
Signature of Co-Applicant

\_\_\_\_\_  
A Commissioner for Oaths in the  
Province of Alberta

\_\_\_\_\_  
Printed Name  
Commissioner for Oaths

My Appointment expires on

Day	Month	Year

## **HI-WOOD MEADOWS INFORMATION SUMMARY**

(complete details are contained in the Co-op's Bylaws, Policies, Housing Agreement etc.)

- A Housing Co-op is managed by the Board of Directors, whom are elected by the members who live here.
- Each household has one voting share.
- The Co-op does not fall under the Landlord and Tenant Act but under the Cooperatives Act and has its own By-laws and Policies that have been approved and adopted by the membership.
- Members agree to be active participants in the operations, management and decision-making process by attending General Membership Meetings. Each year there are three general meetings and one annual meeting with the auditor.
- Members agree to make decisions in the best interests of the Co-op, not just in their personal interest.
- The Board of Directors are elected by the Members and are volunteers.
- Some other volunteer positions may include Gardening, Grounds, Social activities or snow clearing. Everyone can help shovel snow in common areas and be a “snow angel” to members who require a helping hand. Volunteers make the Co-op run smoothly.
- Use of illegal drugs within the Co-op is not allowed. Our Housing Agreement states, “The member will not commit or allow any illegal acts to be committed within the housing unit or in the common areas belonging to Hi-Wood Meadows.” Members are responsible that family, guests and visitors also comply. Smoking of any kind is not permitted within the units.
- There are 62 units at Hi-Wood Meadows: 41 Townhouses and 21 Apartments.
- All units include parking, heat and water in the monthly housing charge. Members are responsible for their own electricity, telephone, TV/cable, internet and insurance.
- All units are equipped with fridge, stove, dishwasher and laundry hook-ups. There is also a common laundry room available for Members to use at a minimal charge.
- Housing charges are the member's fair share of the money required by the Co-op to conduct its business. The amount of the housing charge is determined during the budget process and any changes to the existing monthly housing must be approved by the membership at Member Meeting.

Applicant (s) Initials \_\_\_\_\_

**INFORMATION SUMMARY** (cont'd 2)

- The housing charges effective June 2026 are as follows *(but subject to change if approved by the membership)*:

- 3-bedroom Townhouse (1240 sq ft)	\$1,340. <sup>90</sup>
- 2-bedroom Townhouse/Bungalow (1061 sq ft)	\$1,272. <sup>00</sup>
- 2-bedroom Apartment (875 sq ft)	\$996. <sup>40</sup>
- 1-bedroom Apartment (684 sq ft)	\$927. <sup>50</sup>
- 1-bedroom oversized Apartment (875 sq ft)	\$996. <sup>40</sup>

- Members are required to pay a Share Purchase. Please confirm Share Purchase amount with the office. Payment terms are listed below under “After an Application is Approved and a Unit is Available”.
- As per our Operating Agreement, new applicants annual household income cannot exceed the income ceiling from CMHC. The yearly maximum gross family income at this time is \$141,060.<sup>00</sup>.
- Members are responsible to sign a Housing Agreement, provide other necessary documentation required by the office, proof of insurance for all household vehicles, tenant (content & liability), electricity set up prior to move-in. Pet information is also required per the Policy requirements, if the pet is approved.
- Housing charges are due in full by the 3<sup>rd</sup> of each month and are to be paid by Pre-Authorized Debit. Any member in arrears is subject to remedies and penalties.
- Members are responsible for arranging content and liability insurance and provide a copy to the Office prior to or upon move in, as well as on an annual basis. Townhouse members also require sewer back up coverage.
- Members are required to provide valid and current vehicle information and insurance to the Office on an annual basis.
- Members are responsible annually to provide the Office, a copy of their income verification in the form of their current yearly income tax.
- Members receive a Member Handbook upon move-in which contains information such as the Co-operatives Act, the By-laws, Policies and various other information. It is a member’s responsibility to keep their Member Handbook up to date.
- Members are responsible for reporting all work orders for maintenance to the Office in a timely manner.

Applicant (s) Initials \_\_\_\_\_

**INFORMATION SUMMARY** (cont'd 3 )

- Members are responsible to submit a request and obtain written approval from the Board for any home improvements **prior** to proceeding with work; per the Policy.
- In order to ensure that the Co-op property is maintained in good condition, the Co-op will regularly inspect the interior and exterior of units. Failure to maintain Co-op property is a serious breach of the By-laws, Housing Agreement and Policies.
- Members are responsible to provide the Office with two clear calendar month's notice, in writing, before the first day of the month if they wish to move out. Once notice is given, the unit can be shown to a prospective member.
- Members who move out of the Co-op prior to having lived at the Co-op for less than one year, will be charged an early move-out penalty in an amount as determined by the Board, as outlined in the policy.

**Townhouses/Bungalows**

- All units have a small yard (front and back), a deck, and usually 2 flower beds.
- Members are responsible to keep the grass watered and flower beds free of weeds in the summer. In winter, the member is responsible for removal of snow and ice from steps, sidewalk area and both parking stalls.
- Members are responsible to keep their yards/decks/steps 'clutter free'.

**Apartments**

- In winter, the member is responsible for removal of snow and ice from their assigned parking stall.
- Members are responsible to keep their patio / balcony 'clutter free'.

**Pets**

- **Approval from the Co-op must be received prior** to acquiring a pet. Per the Pet Policy, there are restrictions and guidelines.
- Only two approved pets permitted per Townhouse unit. Only one approved pet permitted per Apartment unit.
- Allowable pets are dogs - that **when full-grown**, are no more than 18 inches from the base of the neck to the floor. Pit Bulls or Pit Bull Terriers are not permitted. Also allowed are cats, birds (maximum size of 8 inches tall), fish (maximum of two 20-gallon tanks provided insurance covers water damage for fish tanks, hamsters or guinea pigs. No exotic animals are allowed.

Applicant (s) Initials \_\_\_\_\_

**INFORMATION SUMMARY** (cont'd 4)

- Pets (allowable per the Policy) must be approved and registered with the Office prior to move-in for new members and **prior** attainment or purchase of a pet for existing members.
- For dogs and cats, there is a non-refundable pet fee required prior to move-in or prior to acquiring a pet, if approved.
- Pet owners are responsible and required to clean up after their pets at all times, ensure that the noise level of their pet is kept at a minimum, and are responsible for the overall welfare of their pets at all times.
- Dogs are not permitted to void on pads within units.
- No animal is allowed to roam free on Co-op property. Dogs must be on a leash at all times when outside the unit and never left unattended. Cats must remain inside the unit.
- Town of High River licenses are required for all dogs. Verification of annual license is requested by the office annually.
- Dogs and cats: Members must provide vet information and all shots must be up to date and pets must be spayed/neutered, when age appropriate. This is requested by the office annually.
- Pet ownership is a privilege, not a right and approval can be revoked if the member is in breach of the Pet Policy guidelines and owner responsibilities.

When an Application is Received

- When an application is submitted to the Office, with all required information and signed by a Commissioner of Oaths, there is a non-refundable application processing fee required prior to acceptance. The Office will review the application, perform a credit check and forward to the Board of Directors for review. If the Board requests, an interview will be scheduled between the applicant and the Board of Directors. Once the Board determines the application status (approved or declined), the Office will contact the applicant to advise of the decision of the Board. If the applicant is approved and no units are available, they will be put on a wait list for future vacancy. The Office will contact an approved applicant when a unit becomes available. The Board can refuse membership if it is determined that this is in the best interest of the Co-op. As stated in the By-laws, the Board will not provide an applicant the reason for refusal of membership.

Applicant (s) Initials \_\_\_\_\_

**INFORMATION SUMMARY** (cont'd....5 )

After an Application is Approved and a Unit is Available

- The new member will arrange with the Office to sign the Acceptance of Unit Form and pay half of the non-refundable Share Purchase by guaranteed funds within 48 hours of acceptance of offered unit. These funds are non-refundable if the member decides to not take the unit after the Acceptance Form is signed and funds are received. \* The first half of the Share Purchase is non-refundable as the unit is being held for the new member, thus not being available for any other approved applicant waiting for a vacant unit.
- The new member will arrange with the Office for a move-in date.
- The new member will arrange with the Office to sign the Housing Agreement and other necessary documentation.
- The new member will provide the Office with payment of the remaining Share Purchase amount, and the first month's housing charges by guaranteed funds prior to receiving occupancy and keys to the unit.
- The new member will arrange for hook-up of all utilities and services that are not included in the housing charge (ie. electricity, television, internet). Confirmation of electrical services in members name for the assigned unit set up for date of occupancy is required to be provided to the Office.
- The new member will provide the Office with a copy of their content, liability and current vehicle insurance. (Townhouse members insurance must include sewer back-up.)
- If the new member has a dog or cat and the pet has been approved, arrangement will be made to pay to the Office the non-refundable pet fee, provide a picture of their pet, a copy of vet information showing all vaccinations are up to date and confirmation the pet is spayed or neutered. For dog owners, a receipt from the Town of High River for licensing is also required.
- Once the Office has received the requirements as noted above, the new member will receive keys to the housing unit.
- A move-in inspection will be arranged with the Office.

Applicant (s) Initials \_\_\_\_\_