



bain apartments co-operative incorporated

Hello to our prospective new members,

Thank you for your interest in becoming a member of the Bain Co-op community. There are several steps to complete to assist us in evaluating your request for membership.

First, there is the application itself. The following application asks for a great deal of information and will take some time to complete. We do require that all applicable fields (other than SIN, which is optional) be filled in. The Bain Co-operative does a credit check, landlord check, employment check and reference check on each applicant. While you are not required to give us your SIN, it is appreciated as it does aid us in ensuring we are getting the correct information on our credit checks. Also, please include proof of household income (such as cheque stubs or income tax assessment, letter from employer) – you must be able to afford the full current housing charge. A non-refundable application fee of \$20 must also accompany the application.

In accordance with the *Personal Information Protection and Electronic Documents Act* (“PIPEDA”), please note that all personal information provided is kept strictly confidential and is used by the Bain Co-op only in evaluating and expediting your request for membership.

Please keep in mind that the Bain Co-op has a policy on over and under-housing when making your choice for the desired size of unit. The basic rule is no more than two people per bedroom and no less than one person per bedroom. A list of the types of units and their associated housing charge is included with this application.

Once your application has been processed, you will be contacted by our office. If you have met our requirements, you will be asked to come in for an interview, which should last no more than half an hour. You will be interviewed by two co-op volunteer members and the purpose is simply to get to know you face to face. We want to make sure the fit is right – for you and for the Bain Co-op.

If you are recommended for potential membership by the Membership Committee and Residents’ Council, you will be placed on our waiting list for an appropriate sized unit as requested. Your place on the waiting list is determined by the date by which the Co-op received your complete application, not by date of interview. Membership is conferred when you sign the Occupancy Agreement and move into a unit. We suggest you keep a copy of the completed application for your own records.

Please notify us immediately in writing or by phone if any contact information on the application changes. If we are unable to contact you, we will assume you are no longer interested in the Bain Apartments Co-operative and withdraw your application. Since we do not maintain inactive files, your application and accompanying documentation will be disposed of in a secure manner.

If you have any questions about this application or require any clarification, please call 416.466.2186 x101 or email membership@100bain.com. Also, please see our website at www.100bain.com for further information.

100 bain avenue, 29A the lindens • toronto • ontario • M4K 1E8 • tel. (416) 466-2186 • fax 463-0829



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<i>For office use only</i> Received by _____	
Date Received _____	Application Number _____
Approved _____	<small>Revised November 2008</small>

Membership Application	CONFIDENTIAL
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SECTION 1 – Personal and Household Information – please fill in all applicable fields.

Applicant A

Last Name		First Name	
Middle Name		Suffix (Sr, II)	
SIN (optional)		Birth Date YYYYMMDD	
Street No		Street Name (include apt)	
City		Province	
Postal Code A9A9A9		Drivers License	
Phone 999-999-9999		Work Phone 999-999-9999	
E-mail address			
Current Rent		Includes Utilities Yes <input type="checkbox"/> No <input type="checkbox"/>	
Current Landlord		Phone	
How long at this address?		Reason for Leaving	
May we contact your current landlord for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/> Why not?			

Applicant B

Last Name		First Name	
Middle Name		Suffix (Sr, II)	
SIN (optional)		Birth Date	
Street No		Street Name (include apt)	
City		Province	
Postal Code		Drivers License	
Phone		Work Phone	
E-mail address			
Current Rent		Includes Utilities Yes <input type="checkbox"/> No <input type="checkbox"/>	
Current Landlord		Phone	
How long at this address?		Reason for Leaving	
May we use your current landlord as a reference? Yes <input type="checkbox"/> No <input type="checkbox"/> Why not?			

Former Address – Applicant A			
Street No		Street Name (include apt)	
City		Province	
Postal Code			
Monthly Rent		Includes Utilities	Yes <input type="checkbox"/> No <input type="checkbox"/>
How long at this address?		Reason for Leaving	

Former Address – Applicant B			
Street No		Street Name (include apt)	
City		Province	
Postal Code			
Monthly Rent		Includes Utilities	Yes <input type="checkbox"/> No <input type="checkbox"/>
How long at this address?		Reason for Leaving	

Please complete the following for all persons that will be sharing the premises other than the applicant(s). Note that all persons 16 years of age and over at the time of application must apply for membership.

Surname	Given Name(s)	Birth Date	Relationship to Applicant(s)

Size of unit requested? IB 1D 2B 2D 3B 4B (B is bedroom and D is with dining room – i.e. 1B, one bedroom - 1D, one bedroom with dining room). Note that unit size must provide no more than one bedroom per person.

How much notice are you required to give to move from your current address? _____

Would you be able to arrange to move on short notice? _____

When are you looking to move? _____

Are you looking for long-term housing? Yes No _____

Will this be your primary address? Yes No _____

The Co-op Pet By-law requires that all pets be spayed or neutered and allows no more than two outdoor pets per unit. Do you have pets? If yes, what kind and how many? No Yes _____

Do you require parking? No Yes

SECTION 2 – Financial and Employment Information

Applicants are required to submit pay stubs for the last three months with this application as income verification. If that is not possible than one of the following must be submitted in their place: Most recent Notice of Assessment; letter from employer confirming length of employment and salary; receipts and/or bank statements if self employed.

Current Employment

	Applicant A	Applicant B
Occupation		
Employer		
Telephone		
Gross Monthly Income		
Length of time with employer		

Other source(s) of income (List source and amount or indicate source of income if not presently employed, i.e. Social Assistance, Employment Insurance, Self-Employment, Student Fellowships etc.)

Applicant A	Source	Amount
Applicant B		

Previous Employment

	Applicant A	Applicant B
Occupation		
Employer		
Telephone		
Gross Monthly Income		
Length of time with employer		

While 50% of the Co-op is designated as “Rent Geared to Income” as part of our commitment to reasonable access to affordable housing, this allotment is completely filled and the Co-op has an extensive existing waiting list. You will therefore be required to pay the full housing charge for your unit. There are no subsidies available through the Co-op.

First and last month’s housing charge will be due in full when you sign the Occupancy Agreement. Full housing charges are due on time and in full by 9:00 AM on the first day of the month. There will be a charge applied for late payment and there are penalties and procedures in place for consistent late or non-payment. Any changes that might occur in housing charges will take affect as of February 1. Increases in housing charges begin February 1st of each year regardless of date of occupancy. Increases are determined by the members under the guidance of the Finance Committee and Residents Council. Do you have any concerns about these guidelines?

Yes _____ No

Do you have any concerns about the housing charge you will be required to pay? (See attached for housing charges by unit list.)

No Yes _____

References – Please give your bank or Credit Union and three other references (non-relatives). Please list name and telephone numbers for all references.

Reference	Applicant	Co-Applicant
Bank/Credit Union	Name	Name
	Telephone	Telephone
Reference 1	Name	Name
	Telephone	Telephone
Reference 2	Name	Name
	Telephone	Telephone
Reference 3	Name	Name
	Telephone	Telephone

SECTION 3 Participation and General Information

How did you hear about the Bain Apartments Co-operative?

Have you ever been involved with any other co-ops? If yes, please give details. No Yes

What do you think are the advantages of co-op living? What do you think are the disadvantages? Please give your impressions even if you do not have prior experience with co-op living.

Describe your experience with community, volunteer and/or non-profit groups. Please be specific and give as much detail of your involvement as possible.

What interests, skills, hobbies or talents are you willing to share that may benefit the co-op?

All members are expected to participate in some aspect of the Co-op's operation and management. There are a number of Committees that enable the Co-op to exist and function properly. In order for the Bain to remain successful, it is crucial that Committees, or more specifically, members who give some of their time to Committees, continue to participate as fully as possible. Our Committees are:

Residents Council	Courtyard Representatives	Personnel Committee
Membership Committee	Computer Centre Committee	Pet Committee
Finance Committee	Community Centre Committee	Property Committee
Member Relations Committee	BainTV Committee	

In addition, there are many other opportunities for volunteers: special events such as the annual street festival, book fairs, the clothing exchange, courtyard gardening and various subcommittees. In which Co-op committee or volunteer area do you see yourself being most effective?

The Bain operates on the principle of open membership. Our members include people of many ethnic, religious, social and economic backgrounds. We are of different cultural and racial backgrounds and differing sexual orientation. Please tell us how you feel about the principle of open membership.

At the Bain, we live in close quarters and the units are not as insulated as apartment buildings are. You **will** hear the day-to-day noises of family living – you may have a unit with both children and pets living above you. You might also have a smoker living above or below you. Given this, please describe your ideal neighbour. Are there any types of people that you would most prefer to live near? That you would not feel comfortable living near?

I/We understand that only members of the Bain Apartments Co-operative Inc. may occupy a housing unit and I/we hereby apply for membership in the Co-operative.

I/We understand that this application must be accompanied by the following:

- ✓ **a non-refundable application fee of \$20.00; and**
- ✓ **income verification for each member of the household who receives an income. (see section 2 p.3)**

I/We understand that the Bain Apartments Co-operative Inc. is formed for the purpose of providing affordable housing to its members and that membership includes the responsibility to participate in the management and maintenance of the Co-operative.

I/We understand that all members of our household 16 years of age and over are included in this application and are applying for membership. All applicant(s) will be charged a membership fee of \$2.00 upon moving in.

I/We declare that all the information in this application is correct and hereby authorize the Co-operative to verify, and maintain on file as long as required, any or all of the information collected herein and perform a credit and reference check at the discretion of the Co-operative.

Applicant(s) please sign and date where indicated below.

Signature

Date

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