



THURLESTONE CO-OPERATIVE INC.
22 Fishleigh Drive, Unit 3, Scarborough, ON, M1N 1G9
(416) 261-1110 (Phone) (416) 261-4744 (Fax)



MEMBERSHIP APPLICATION



THURLESTONE CO-OPERATIVE INC.

22 Fishleigh Drive, Unit 3, Scarborough, ON, M1N 1G9
 Phone: 416-261-1110 Fax: 416-261-4744 E-mail: thurlestonecoop@rogers.com

APPLICATION FOR MEMBERSHIP

Welcome to Thurlestone Co-operative Inc. We are a 5 building, 69-unit co-op community, consisting of 1, 2, & 3 bedroom apartments operating under two phases. Phase I is comprised of four buildings including 16, 18, 22, and 24 Fishleigh Drive and Phase II is one building at 2 Folcroft Avenue.

<u>FOLCROFT BUILDING</u>		<u>UNIT HOUSING CHARGES</u> Effective June 1 st , 2011	<u>MAINTENANCE DEPOSIT</u> One Time Fee Required Upon Move-In
1	Bedroom	\$1031.00	\$300.00
2	Bedroom	\$1108.00	\$400.00
3	Bedroom	\$1199.00	\$500.00

<u>FISHLEIGH BUILDINGS</u>		<u>UNIT HOUSING CHARGES</u> Effective June 1 st , 2011	<u>MAINTENANCE DEPOSIT</u> One Time Fee Required Upon Move-In
1	Bedroom	\$764.00	\$300.00
2	Bedroom	\$862.00	\$400.00

- **Housing Charge Assistance "Subsidy":** For those households who qualify, housing charge assistance may be available and will be distributed on a first-come first-serve basis.
- **For Fishleigh Applicants (only):** As of March 2011, the current ingoing income limit set by the Federal Government is \$64,704.00. This means that your household's total combined gross income may not exceed this income limit if you are applying for a unit in the Fishleigh Buildings only. Exceptions may only be made when all other qualifying applicants for Fishleigh units have been exhausted. This does not apply for Folcroft unit applicants.
- **Parking:** Parking Spaces are allocated at a monthly rate of \$25.00 per stall. Each unit is entitled to a minimum of one spot. Additional spots are allocated in accordance with the Parking Policy.
- **Unit Contents Insurance:** The Co-op insures its property and buildings. Our insurance does not cover your contents within a member unit or locker. It is your responsibility to obtain your own contents insurance so that in the event of any accident or theft, your contents will be covered under your own unit insurance policy. If you fail to obtain your own contents insurance, the Co-op will not assume any liability for any lost or damaged items belonging to you, within your unit, or within any of its common areas.

PLEASE CIRCLE LOCATION & UNIT SIZE REQUESTING:

FOLCROFT:	1	2	3	NEED SUBSIDY?	YES	NO
FISHLEIGH:	1	2		NEED SUBSIDY?	YES	NO

Box 1



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PERSONAL DATA (Applicant)

(See Note #1, pg.8)

Box 2

Applicant's Name:	
Present Address:	
Postal Code: _____	Email Address: _____
Telephone Numbers: Home # _____	Work # _____ Cell # _____
Other Contact Person: _____ Phone # _____	
Birth Date (M/D/Y):	Social Insurance Number:
How long have you resided at present address?	Present Rent \$ _____ /mo.
Present monthly Utilities \$	Present Monthly Parking \$
Present Landlord's Name:	Phone #
Landlord's Address:	
May we use your Landlord as a reference?	Yes No
If not, please explain:	
Previous Address if less than 2 years:	
Previous Landlord's Name:	Phone #:
How long did you reside at this previous address:	Previous Rent \$ _____ /mo.
Lived in Provincially funded social housing previously?	Yes No
If yes, list address here:	

Box 3

Employment of Applicant

(complete if applicable, otherwise proceed to Box 4)

Occupation:	
Name of Employer:	Phone #:
Address:	
*Gross Monthly Rate of Pay:	Date employment commenced:
Previous Employer (if above less than 2 years):	
Address:	

*You must attach verification from all sources of household income as per note #2, page 8.

Box 4

Other Income/Assets: (Please list all Other Income and all Assets below. See Note #2, page 8.)

*Monthly Income:	Source:
*Monthly Income:	Source:
Assets:	Value:



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Box 5

PERSONAL DATA (Co-Applicant)

(See Note #1, pg.8)

Co-Applicant's Name:	
Present Address:	
Postal Code: _____	Email Address: _____
Telephone Numbers: Home # _____	Work # _____ Cell # _____
Other Contact Person: _____ Phone # _____	
Birth Date (M/D/Y): _____	Social Insurance Number: _____
How long have you resided at present address?	Present Rent \$ _____ /mo.
Present monthly Utilities \$	Present Monthly Parking \$
Present Landlord's Name:	Phone #
Landlord's Address:	
May we use your Landlord as a reference?	Yes _____ No _____
If not, please explain:	
Previous Address if less than 2 years:	
Landlord:	Phone #:
How long did you reside at this previous address:	Previous Rent \$ _____ /mo.
Lived in Provincially funded social housing previously?	Yes _____ No _____
If yes, list address here:	

Box 6

Employment of Co-Applicant

(complete if applicable, otherwise proceed to Box 7)

Occupation:	
Name of Employer:	Phone #:
Address:	
*Gross Monthly Rate of Pay:	Date employment commenced:
Previous Employer (if above less than 2 years):	
Address:	

*You must attach verification from all sources of household income as per note #2, page 8.

Box 7

Other Income/Assets: (Please list all Other Income and all Assets below. See Note #2, page 8.)

*Monthly Income:	Source:
*Monthly Income:	Source:
Assets:	Value:



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Box 8

Please list everyone who will be residing in the intended household and you must attach proof of legal residency status in Canada for each resident to this application:

Name	Citizenship or Immigration Status (attach proof)	Date of Birth (m/d/y)	Relationship to Applicant (completing this field is optional)

(Everyone 18 years of age or more must apply for membership within the Co-op.)

Box 9

FINANCIAL INFORMATION:

CREDIT HISTORY: We will investigate your credit history as part of our application review process. If you wish to explain any financial difficulties or circumstances, please do so here:

Current Loans and/or Credit Card Accounts	Amount Owing	Monthly Payment

Bank Name	Address	Phone#	Account Type & Number

Note: This information is for the purpose of a complete credit check and will be held in the strictest confidence.



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PARTICIPATION

Box 10 Below you will find a list of possible areas of participation. All members of Thurlestone Co-operative must contribute a minimum of four hours per month. Therefore, all applicants must indicate below by placing their initials beside areas of interest for fulfilling participation requirements.

<u>Maintenance Skills:</u>		Recycle Knowledge _____	
Countertop Replacement	_____	<u>Housekeeping Skills:</u>	
General Carpentry	_____	Maintaining cleanliness of building	_____
Hardwood Floor Refinishing	_____	Vacuuming	_____
Floor Tiling	_____	Keeping common areas clean such as lobby, stairwells, hallways, laundry room, etc.	_____
Screen Replacing	_____	<u>Finance Skills:</u>	
Caulking bathrooms & kitchens	_____	Accounting Skills	_____
Grouting tiles	_____	Input on budgeting	_____
Plastering	_____	<u>Office Skills:</u>	
Door Repairs: Align/Replace	_____	Typing	_____
- Closures/Handles	_____	Filing	_____
Painting	_____	Photocopying	_____
Drywall/Taping	_____	<u>Social Committee:</u>	
Plumbing: Washer Replacement	_____	Shopping	_____
- Tap Replacement	_____	Prepare luncheon for clean-up days	_____
- Toilet repairs	_____	Organizing Social Functions	_____
Electrical: Receptacle/Switch Replace	_____	<u>Membership Committee:</u>	
- Light Fixture Replacement	_____	People Skills	_____
- Minor Rewiring	_____	<u>Board of Directors Skills:</u>	
Power Equipment	_____	Decision Making	_____
<u>Landscaping Skills:</u>		Dealing with Difficult Matters	_____
General Knowledge regarding plant requirements for both annuals and perennials	_____	Attend Regular Meetings	_____
Physical ability for raking, mowing, snow shoveling, digging, salting, etc.	_____	<u>Other Skills:</u>	
Organizing clean-up days	_____	_____	
<u>Newsletter Skills:</u>		_____	
Typing	_____	_____	
Creativity	_____	_____	
<u>Environmental Skills:</u>		_____	

Please indicate when you would be available to participate: Evenings/Weekends/Days _____



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COMMENT SHEET

- Box 11
1. How did you hear about Thurlestone Co-op? _____

 2. Do you know anyone residing at Thurlestone Co-op and if so who? _____

 3. How do you think co-op living differs from other types of housing? _____

 4. What kind of contribution do you think you would be able to make on a regular basis? _____

 5. Why would you like to live in this Co-op? _____

 6. Do you have any experience or interest in other types of Co-ops or organizations like tenant's associations, unions, community involvement groups, etc.: _____

 7. If you had a problem with a neighbour in your building (noise, pets, etc.) what would you do to remedy the situation? _____

 8. Does anyone in your household have any health problems/concerns that affect your housing needs? _____

 9. Do you have any special concerns about the Co-op? _____

 10. Do you have any pets? Yes No How Many? What Kind? _____
 11. Do you mind living near pets? _____
 12. Do you require parking? Yes No Make/Model/Year of Vehicle _____

Vehicle License Number _____
Name of Vehicle Owner _____
Driver's License Number _____



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APPLICANT(S) STATEMENT

I/WE UNDERSTAND AND AGREE TO THE FOLLOWING:

The basic objective of Thurlestone Co-operative Inc. is to preserve our neighbourhood and maintain good standards of housing and to provide secure, reasonably priced housing for individuals and families with a wide range of income.

Only the persons named on this application may live in my/our assigned unit. If other people wish to move in, it is my/our responsibility to ensure that they apply separately for membership prior to moving in, and/or that I/We will apply for Long Term Guest status for my/our guests in accordance with the rules of the Co-operative's bylaws.

It is mandatory that each member participate a minimum of four (4) hours per month, as well as, attend all General Members meetings, participate on clean-up days, and share in the housekeeping duties.

To be eligible to occupy a housing unit, I/We must become a member of Thurlestone Co-operative Inc. I/We must be Canadian citizen(s), Landed Immigrant(s), or Refugee Status. Upon being approved for membership by the Board of Directors of the Co-operative, I/We understand that we must submit a non-refundable membership fee of \$10.00 per approved member.

Once I/We occupy a unit, I/We will pay the Co-op a monthly sum called a housing charge to cover the expenses for that unit. Housing charges cover the mortgage payments, interest, utilities, maintenance costs, and all other operating and capital costs. Parking is available for an extra fee. All households must obtain their own personal property insurance at their own expense.

Within 24 hours of acceptance of a unit, I/We must submit to the Co-op a \$100 non-refundable retainer that will be applied to the first month's housing charge.

Within 5 days of acceptance of a unit, I/We must submit to the Co-op the following fees:

- 1) A CERTIFIED CHEQUE OR MONEY ORDER for the last month's housing charge deposit (including parking if any), plus the total amount of the Maintenance Guarantee or one sixth of the Maintenance Guarantee (if paying this item in equal instalments within the first six months of occupancy), plus the \$10 per member fee. These items are non-refundable.
- 2) A cheque or money order in the amount of one month's housing charge (including parking, if any) dated for the first day the applicant(s) are to assume occupancy of the unit, less the \$100 retainer.

Applications will be handled on a first-in basis for interviewing and waiting list purposes. After the application has been approved, your name(s) will be placed on the appropriate waiting list according to the date the application was received.

We are unable to determine the length of waiting period prior to a unit becoming available. It could take anywhere from two (2) months to three (3) years. Therefore, it is important and your responsibility to notify the Co-operative of any changes in your address, work, home, other contact numbers, so that we may keep our information current and will be able to reach you in the event of an upcoming vacancy.

I/We also understand that I/We will sign the Co-op's Occupancy Agreement when I/We move in. The Occupancy Agreement sets out the terms, conditions, rights, and responsibilities of membership.



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I/We declare all information reported within this application to be correct. I/We hereby authorize Thurlestone Co-operative Inc. to verify any or all information claimed herein. We understand and authorize the Co-operative to conduct a credit bureau check, landlord verification, employment verification, and any other verification the Co-operative may require. Please also sign Schedule A attached.



NOTE #1

All personal information obtained through this application will be used exclusively by the Membership Committee, Board of Directors, and staff of Thurlestone Co-operative Inc. for the purposes of evaluating your request for membership and will be held in the strictest of confidence. Your application and all personal information will be held on file for a maximum period of seven years, after which all documents will be shredded.

NOTE #2:

Gross monthly income includes, but is not limited to the following: employment income, pension income, incentive pay, tips, U.I.C., alimony or support income, bonds, investments, bank interest, grants, family and social benefits, and mortgage income.

Income verification must be submitted with this application by all income earners in the household. Acceptable employment verification would be either a letter from your employer and/or two (2) recent consecutive months of pay stubs. If self-employed, verification must be in the form of a professionally audited financial statement, and/or a certified copy of your latest income tax return. All income monies must be reported with this application in the Employment section or Other Income section for the applicant and co-applicant. Proof of other forms of income must also be verified and submitted with this application, i.e. Social Assistance Benefits would be verified with your most recent month's benefit statement and drug card.

I/We have read, understand, and agree to the principles and objectives of Thurlestone Co-operative Inc. as stated above and consent to verification of all information contained herein. I/We consent to the Co-op maintaining this application and all personal information contained therein for not longer than seven years from the date of this application.

Date:

Signature of Applicant

Date:

Signature of Co-Applicant

**Rental Application
Addendum**

SCHEDULE "A"

(Each tenancy candidate must complete a separate application)*

Information**

The word "Information" means credit information, personal information, information about the services you use that are provided by the Landlord as listed in this rental application and information relating to your tenancy at the Premises applied for in this rental 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 dependants, 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 tenant, including your social insurance number (optional), 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 tenant.

Collection, Use and Disclosure of Information:

In consideration for the Landlord accepting you as a tenant and entering into a lease/tenancy agreement with you, you expressly consent to and authorize the following:

1. The Landlord 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 The Landlord.
2. The Landlord may use Information about you to determine your suitability as a tenant and as permitted or required by law.
3. The Landlord 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 Residential Rental Application are true and you expressly authorize all references given to release information about you to the Landlord 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.

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

Applicant's Signature	X	Co-Applicant's Signature	X
Print Name	X	Print Name	X
Date (yyyy / mm / dd)	X	Date (yyyy / mm / dd)	X

* Signature space is provided for applicant and co-applicant however Rent Check suggests that if more than 2 applicants that the landlord provides each tenancy applicant with a separate copy of this Residential Rental Application for completion.

**DISCLAIMER: Rent Check does not represent, warrant or guarantee that this Consent Statement will be valid or enforceable in all circumstances or for every landlord. Each individual landlord should modify the language of this Consent Statement to suit their individual circumstances, and should obtain legal advice regarding the appropriate consent to be obtained from their prospective tenants.