



Eight Oaks Housing Cooperative

3637 Cambie Street
Vancouver, BC V5Z 2X3

Procedures for Becoming a Member of Eight Oaks Cooperative

You must Be 19 years of age or older

- STEP 1** You must fill in an income and application form
- STEP 2** You will be placed on our external waiting list
- STEP 3** When on the waiting list you are responsible for updating your application every 12 months by mail or your application becomes invalid
- STEP 4** When a unit becomes available, the external waiting list will be referred to.
- STEP 5** If you fit the co-op's needs, you will be requested to attend an interview.
- STEP 6** The Membership Committee will meet to discuss your application and make its recommendations to the Board of Directors. You will be notified as soon as possible as to the decision.
- STEP 7** If accepted as a member, you will be required to pay your total share purchase within 7 days, and give us 12 month postdated cheques for your housing charges and sign a lease.
- STEP 8** Congratulations! You are now member of Eight Oaks Housing Co-operative. You will have the right and obligation to participate in all affairs of the Co-op

Please retain this page as your copy



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Thank you for your interest in Eight Oaks Co-operative. Attached are some facts about our Co-op. Please keep this sheet for future reference.

We have 42 units that range from bachelor units to three bedrooms. We also have limited underground parking. The square footage is as follow: Bach 425 sq", 1 bedroom 600 sq", two bedroom 775 sq" and 3 bedroom is 950 sq"

Our share purchase is \$4000 for two and three bedrooms, and \$ 2700 for one-bedroom and bachelor suites. Our housing charges are revised every year when the members approve the budget.

There is a minimum income required for new members, for one bedroom \$35.000, for two bedroom \$45.000 and for three bedroom \$55.000. Please be advised there is no subsidy available at this time.

Currently our Co-operative is at full occupancy. If you wish to be added to our waiting list, please fill out the application **in full**. You will be contacted when a vacancy arises. Please refrain from calling the office asking for the status of your application, the office does not have access to the information.

Every 12 months you are required to confirm your wish to remain on our waiting list. You may do this by faxing or writing to us (no phone calls, please). If you do not advise us every 12 months, your application will be considered inactive and you will be removed from the waiting list. Your application will then be destroyed.

Please let us know about any changes to your information, as soon as possible. Our e-mail address is **8oakscoop@gmail.com**

Check our website www.eightoaks.ca if you require any additional information.

EIGHT OAKS HOUSING COOPERATIVE
 3637 CAMBIE STREET, VANCOUVER, B.C., V5Z 2X3
APPLICATION FORM

FOR OFFICE USE ONLY:				
Date Received: _____	Comments: _____			
Applied for:	<i>Bach</i>	<i>1 Bdrm</i>	<i>2 Bdrm</i>	<i>3 Bdrm</i>

1. PERSONAL INFORMATION

APPLICANT'S NAME:			
_____		(Last)	(First)
CURRENT ADDRESS:			
_____		(Apt. Number, Street)	(City, Province)
			(Postal Code)
Telephone #'s:	Home: _____	Cell: _____	Work: _____
OCCUPATION: _____			
CO-APPLICANT'S NAME:			
_____		(Last)	(First)
OCCUPATION: _____			
Telephone #'s:	Home _____	Cell: _____	Work: _____

PREVIOUS ADDRESSES (Last 5 years):			
<i>Apt. Number/Street</i>	<i>City, Province</i>	<i>Postal Code</i>	<i>Dates Resided</i>
1. _____			
2. _____			
3. _____			
CURRENT LANDLORD INFORMATION:			
<i>Name</i>	<i>Address</i>	<i>Phone #</i>	

PREVIOUS LANDLORD INFORMATION:			
<i>Name</i>	<i>Address</i>	<i>Phone#</i>	

May we contact your present and past landlords for a reference? Yes / No

NAME AND INFORMATION OF OTHER ADULTS AND CHILDREN WHO ARE/WILL BE RESIDING WITH YOU:

	<i>First and Last Name</i>	<i>Relationship to you</i>	<i>DOB (Children Only)</i>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

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3637 CAMBIE STREET, VANCOUVER, B.C., V5Z 2X3

2. HOUSING NEEDS

Bachelor ____ 1 Bdrm ____ 2 Bdrm ____ 3Bdrm ____

Number of Parking Spaces needed: ____ Pets: Yes / No If yes what type?

3. QUESTIONNAIRE

Itemize any past volunteer work:

Have you had experience with co-ops of any kind? Yes / No

If yes, please explain good and bad points. If not, what do you expect to be the good or bad point? _____

Do you have any special skills or interests which might be helpful in the running of a housing co-op? Please explain:

ACCORDING TO THE STRUCTURE OF CO-OPERATIVE LIVING AND THE LEASE YOU WILL SIGN BEFORE YOU MOVE IN, YOU MUST CONTRIBUTE TO SUCCESSFUL RUNNING OF THE COOP.

Which committees would you be prepared to serve on?

Finance

Social

Membership

Policy

Maintenance/Gardening

Long Term Planning

I/WE UNDERSTAND THAT MEMBERSHIP IN EIGHT OAKS HOUSING CO-OPERATIVE WILL REQUIRE PARTICIPATION OF ALL RESIDENT IN CO-OP.

I ACKNOWLEDGE I/WE WILL BE REQUIRED TO PURCHASE SHARES AS CALLED FOR BY THE BOARD OF DIRECTORS IF ACCEPTED FOR MEMBERSHIP. I/WE HEREBY AGREE TO OBSERVE AND BE BOUND BY THE MEMORANDUM RULES AND POLICIES OF EIGHT OAKS HOUSING COOPERATIVE IF ACCEPTED FOR MEMBERSHIP.

Signatures:

Applicant:

Co-Applicant:

Date signed:

Private Information Set Statement: Eight Oaks Housing Cooperative collects personal information with the sole purpose of assessing units size and financial feasibility. We don't share or disclose this information with anybody and only two or three people who participate in this process view it. If the applicant is not successful in getting a unit, this information is destroyed immediately.

If you have any concerns in how we handle your personal information, write to us at www.8oakscoop@gmail.com



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INCOME VERIFICATION FORM

We require the following information in order to maintain the economic viability of the cooperative. Accuracy is essential.

- In all categories of income use the present Gross Annual Figures.
- List all sources of Household income.

	<u>Applicant</u>	<u>Co-Applicant</u>	<u>Other</u>
<u>Household Members</u>			
Salary and/or commission	_____	_____	_____
Self-employed income	_____	_____	_____
Unemployment Insurance	_____	_____	_____
Pension	_____	_____	_____
Interest or Investment	_____	_____	_____
Child Support/Alimony	_____	_____	_____
Other: Can include Student Loan, Foster Child, Gain (Shelter allowance) etc (Please specify)	_____	_____	_____
TOTALS	_____	_____	_____

Please indicate below if you expect any significant changes in your income during the next 12 months, giving date, reason and approximate increase or decrease (i.e. retiring, having baby, promotion, etc.)

We hereby give Eight Oaks Housing Cooperative the authority to verify or seek corroboration, in whatever form they deem appropriate, of the reported income.

I, _____ do hereby confirm that the correct income has been declared by all members of our household.

Name of Employer (Applicant): _____, Phone: _____
 Name of Employer (Co-Applicant): _____, Phone: _____
 Applicant Signature in full _____, Date: _____
 Co-Applicant Signature in full _____, Date: _____

Signatures in full of all other household members declaring incomes above:
 Name: _____, Date: _____
 Name: _____, Date: _____