

## **Checklist for Completing Application for Purchase Lottery**

Please check off applicable boxes once completed and attach this checklist to your Application.

I/we nave:
☐ Read and understood the <b>Tofino Housing Corporation Price Restricted Resident Restricted Resale Policy</b> and <b>Purchase Lottery Policy.</b>
☐ Completed the <b>Purchase Lottery Application</b> , including confirmation of your household makeup in point 6 of the attached Purchase Lottery Application. Applicants are required to disclose <b>all members of their household</b> including any <b>common law or spousal relationship</b> .
Attached documentation confirming current employment in Tofino. This must be a letter or confirmation of employment contract. Paystubs not accepted. Self-employed individuals must provide evidence (e.g. tax returns, accountant certified records) of self-employment income with Tofino-based business.
Attached documentation confirming residency in Alberni-Clayoquot Regional District for 2 out of the last three years. Some combination of a tenancy agreement, rent receipts or letter from landlord(s) confirming length of tenancy along with Driver's License or utility bill/cell phone bill with same address.
☐ Copies of the last fiscal year's Notice of Assessment and T1 General
☐ Provided original documentation confirming Canadian citizenship or Permanent Residency to the THC Office. <b>Note: A Driver's License is not sufficient proof of citizenship.</b>
Attached \$150.00 payment for the <b>Purchase Lottery Application Fee.</b> Cash or cheques made payable to the Tofino Housing Corporation will be accepted. The Tofino Housing Corporation cannot accept debit or credit cards for this payment.
☐ Confirm I/we understand I/we are required to pay a \$4000 Purchase Fee to the Tofino Housing Corporation.
☐ Have the Application signed by a Commissioner for taking Affidavits for the Province of BC. This can be done free of charge at the District of Tofino Municipal Hall. ID is required and for join applications both applicants must be present.

Personal information requested on this form is collected and used solely for the purpose of processing and administration of this application as authorized by the Freedom of Information and Protection of Privacy Act.



## **Application For Tofino Housing Corporation Purchase Lottery**

CANADA	) IN THE MATTER OF APPLICATION FOR THE		
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PROVINCE OF BRITISH COLUMBIA	) THE PURCHASE LOTTERY FOR AN		
DISTRICT OF TOFINO	) AFFORDABLE HOMEOWNERSHIP HOME,		
DISTRICT OF TOFINO	AFFORDABLE HOMEOWNERSHIP HOME,		
	) PURSUANT TO THE BRITISH COLUMBIA		
	) EVIDENCE ACT		
	•		

l,	
(print full legal name of primary applicant)	
and,	
(print full legal name of secondary applicant	:/spouse/ common law partner)
of(print mailing address)	
email	, 2nd email
phone	_, 2nd phone
	and Employer (print secondary applicants employer name)

In the District of Tofino, Province of British Columbia, Canada

## DO SOLEMNLY DECLARE THAT:

- 1. I am an applicant for selection as an eligible purchaser of an affordable homeownership unit on the conditions and terms set out by the Tofino Housing Corporation Inc.
- 2. I have completely read and understood the **Tofino Housing Corporation Price Restricted Resident**Restricted Resale Policy and the Tofino Housing Corporation Price Restricted Resident Restricted
  Purchase Lottery Policy
- 3. I am over 19 years of age and I am a Canadian citizen or Permanent Resident.
- 4. I have lived at least 2 of the last 3 years within the Alberni –Clayoquot Regional District.
- 5. I have for a least one year:
- a) been employed for an average of not less than 26 hours per week on an annual basis at a business or businesses or institution or institutions (which doesn't require a business license) located within the boundaries of the District of Tofino or with Island Health or Parks Canada or BC Parks, OR



b) been self- employed with a bus that 90% of my income comes fro		t of Tofino Busine	ess License and am	able to confirm	
6. Neither I nor my spouse nor my directly or indirectly through a tru except a Tofino price controlled re	st, business, or oth	erwise) any real		•	
7. My household made no more the	nan \$ in	in tota	l gross income.		
8. The unit will be my primary resi	dence.				
9. The table below lists all individus spouse:	uals who will occup	y the dwelling un	iit and any common	law partner or	
Name (include each family member)	Age		Employer		
10. I have attached to this applic Tofino, my residency in the Alber	ni-Clayoquot Regio	onal District and	my household inco	me.	
AND I make this solemn declarations same legal force and effect as if m		believing it to be	true and knowing t	that it is of the	
Sworn before me at the District of Tofino in the Province of British Columbia	а	) )			
this day of (month)	, (year)	) Sign and Pri ) ) ) )	nt Name		
A commissioner for taking affidavits in and for the Province of British Columbia		) Sign and Pri	) Sign and Print Name		
(The making of a false statement of Code. Perjury is an indictable offer exceeding fourteen years)		•	• •		

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