



# AFFORDABLE HOUSING IN GOLDEN

## **What is Affordable Housing?**

Affordable Housing is simply housing that is available for local residents who cannot afford to rent or buy a house on the open market.

## **Golden's Housing Committee**

Golden's Housing Committee was formed in November of 2008. The Committee's primary objectives surround increasing the affordable housing stock in the community and providing a range of housing opportunities for local residents.

## **Who is Eligible?**

Please review the following eligibility criteria to see if you or your household is eligible for an affordable housing unit. Affordable Housing can be available for those who:

- Are a resident of B.C
- Are at least 18 years of age
- Are a Canadian citizen or a landed immigrant
- Have lived in Golden for at least 2 years or worked in Golden for a minimum of 6 months
- Have a gross household annual income of less than \$60, 000
- Have a current pre-approved Mortgage Letter

## **Restrictions**

- The applicant household must use the affordable unit as their sole residence.
- Housemates and boarders are permitted as long as the eligible applicant remains in permanent residence.

## How do I Apply?

To apply for affordable housing in Golden, fill out the Affordable Housing Application Form that is available at the Town Office, or on the Town of Golden Website at <http://www.town.golden.bc.ca/>

Applicants must have:

- Identification (2 pieces)
- Proof of current and recent residence
- Proof of employment
- Proof of income
- Supporting documentation for all assets and liabilities
- Pre Approved Mortgage Letter

*\*see the Affordable Housing Application for specific documentation requirements*

## Frequently Asked Questions

### How are applicants chosen?

Applicants are chosen based on:

1. Basic eligibility
2. First come first serve basis
3. Best match to unit type

### Is there an application fee?

There is no application fee.

### How much will the units cost?

The cost of Affordable Housing units will depend on the styles and sizes of the units. Affordable Housing units are guaranteed to remain at below market value.

### Why should I apply now?

By applying early you secure your spot on a waitlist, and improve your chances at securing the next available unit.

### Is there an application deadline?

There is no application deadline; applications will be accepted continuously. An acknowledgement letter will confirm the receipt of your application.

**SUBMIT  
APPLICATION  
TO:**

**Attn: Golden  
Housing  
Committee**

Town of Golden

PO Box 350,

810 S. 9<sup>th</sup> Ave.

Golden B.C

V0A 1H0



**What are the responsibilities of selected purchasers?**

Successful applicants are required to attend an awareness seminar on the Affordable Housing Program. The dates and times of seminars are to be announced at a later date.

**Are there any exceptions to the eligibility criteria?**

Under special circumstances the Housing Committee may grant an applicant an exemption from an element of the eligibility criteria. If you do not meet eligibility requirements please apply anyway, and list your reasons for non-compliance on an attached document.

Please contact the Manager of Development Services/ Planner, if you have any further questions.

Phone: (250) 344-2271 ext. 235  
Email: [planner@town.golden.bc.ca](mailto:planner@town.golden.bc.ca)

**SUBMIT  
APPLICATION  
TO:**

**Attn: Golden  
Housing  
Committee**

Town of Golden  
PO Box 350,  
810 S. 9<sup>th</sup> Ave.  
Golden B.C  
VOA 1H0



# Affordable Housing Application Form



810-9<sup>th</sup> Ave. S.,  
Box 350  
Golden, BC  
V0A 1H0  
Ph.250 344-2271  
Fax 250 344-6577

[www.town.golden.bc.ca](http://www.town.golden.bc.ca)

## FOR OFFICE USE ONLY:

File # \_\_\_\_\_  
Cross Ref Files \_\_\_\_\_  
Fees \_\_\_\_\_  
Receipt # \_\_\_\_\_  
Receipt Code \_\_\_\_\_  
Confirmation Sent (date) \_\_\_\_\_

The information collected on this form will be used to process your application. Under the Freedom of Information and Protection of Privacy Act, we are required to release portions of this information when requested.

## Applicant(s) Information

Applicant 1 - Full Legal Name (PLEASE PRINT)

Applicant 1 - Full Legal Name (PLEASE PRINT)

## Compliance with Human Rights Code

All applicants to this Program shall be considered free of any discrimination on the following grounds: Race, colour, ancestry or place of origin; Age; Sex or sexual orientation; Physical or mental disability; Religious or political belief; Marital or family status; Political belief, or; Criminal convictions unrelated to the purpose of the Program.

## Household Definition

A **household** is defined as all individuals living within the same residence who are related as immediate family. Each Adult member within each household must be named in any application for eligibility under the Program for their immediate family.

**Immediate family** of the applicant includes the spouse, common law spouse, dependent parent(s) or grandparents, sibling(s), and any biological or adopted children or grandchildren of the applicant.

## Conflict of Interest Relationship

Please state your relationship(s) with any member(s) of the Town of Golden Council, Town of Golden Staff, or Golden Housing Committee. Disclosing your relationship will not affect your eligibility, however failure to disclose may result in your disqualification from the program.

Council/Staff/Committee Member: \_\_\_\_\_ Relationship: \_\_\_\_\_

\_\_\_\_\_  
Signature (Applicant 1)

\_\_\_\_\_  
Date (D/M/Y)

\_\_\_\_\_  
Signature (Applicant 2)

\_\_\_\_\_  
Date (D/M/Y)

A: Contact Information	
APPLICANT 1	APPLICANT 2
Full Legal Name:	Full Legal Name:
Phone Home: Work: Cell:	Phone Home: Work: Cell:
E-mail:	E-mail:
Mailing Address:	Mailing Address:

**B. Household Composition**

(List yourself on line 1, and then list all other persons in your household who will be living with you.)

Full Name (Last/First)	Birthday (D/M/Y)	Age	Sex	Relationship to Applicant	Type of Disability (if any)	Years of Residence in Golden
1.						
2.						
3.						
4.						
5.						
6.						
7.						

**C: Age and Citizenship**

**Applicants to be on title must be of British Columbia Legal Age (18 years) and at least one applicant must be a Canadian Citizen or Permanent Resident of Canada. Each applicant must provide a minimum of two original pieces of identification including a BC Healthcare Card and one with photo, to demonstrate proof of identity, age and legal status in Canada. This identification will be copied at the time and returned upon submission of this application.**

APPLICANT 1	APPLICANT 2
<b>Legal Status in Canada:</b> <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Permanent Resident  <b>Two pieces of ID:</b> *Required: <input type="checkbox"/> BC Healthcare Card #: _____  And one of the following: <input type="checkbox"/> BC Drivers License <input type="checkbox"/> BC Identification Card <input type="checkbox"/> Canadian Passport <input type="checkbox"/> Canadian Citizenship or Resident Card <input type="checkbox"/> Other: _____	<b>Legal Status in Canada:</b> <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Permanent Resident  <b>Two pieces of ID:</b> *Required: <input type="checkbox"/> BC Healthcare Card #: _____  And one of the following: <input type="checkbox"/> BC Drivers License <input type="checkbox"/> BC Identification Card <input type="checkbox"/> Canadian Passport <input type="checkbox"/> Canadian Citizenship or Resident Card <input type="checkbox"/> Other: _____

D: Residency & Employment			
RESIDENCY			
<p><b>Applicants must currently live in Golden or Area A and have lived in Golden or Area A for at least 2 years <u>or</u> meet the employment criteria identified in the following section.</b></p>			
APPLICANT 1		APPLICANT 2	
Current Street Address:		Current Street Address:	
From (D/M/Y): ____/____/____		From (D/M/Y): ____/____/____	
Proof of Residency: <input type="checkbox"/> Landlord Letter; or <input type="checkbox"/> Property Tax Assessment or rental lease agreement AND first and last month's utility bills with street address; or <input type="checkbox"/> Other (specify): _____		Proof of Residency: <input type="checkbox"/> Landlord Letter; or <input type="checkbox"/> Property Tax Assessment or rental lease agreement AND first and last month's utility bills with street address; or Other (specify): _____	
Previous Address:		Previous Address:	
From (D/M/Y): ____/____/____		From (D/M/Y): ____/____/____	
Proof of Residency: <input type="checkbox"/> Landlord Letter; or <input type="checkbox"/> Property Tax Assessment or rental lease agreement AND first and last month's utility bills with street address; or <input type="checkbox"/> Other: _____		Proof of Residency: <input type="checkbox"/> Landlord Letter; or <input type="checkbox"/> Property Tax Assessment or rental lease agreement AND first and last month's utility bills with street address; or <input type="checkbox"/> Other: _____	

  

EMPLOYMENT			
<p><b>At least one applicant must be one of the following: an employee working for a licensed Golden or Area A Business, who has done so for a minimum of six months; a self-employed person with a Golden or Area A business license or equivalent; or a retiree who meets the residency criteria in the previous section.</b></p>			
APPLICANT 1		APPLICANT 2	
Category of Employment: <input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Retired		Category of Employment: <input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Retired	
Name of Business:		Name of Business:	
Reference Name:		Reference Name:	
Position:		Position:	
Phone:		Phone:	
From (D/M/Y): ____/____/____	Hours/week:	From (D/M/Y): ____/____/____	Hours/week:
<b>Proof of employment:</b> Employed: <input type="checkbox"/> Three (3) most recent pay slips; <u>or</u> <input type="checkbox"/> Employment contract Self-Employed: <input type="checkbox"/> Golden or Area A business license Retired: <input type="checkbox"/> Fulfill residency criteria		<b>Proof of employment:</b> Employed: <input type="checkbox"/> Three (3) most recent pay slips; <u>or</u> <input type="checkbox"/> Employment contract Self-Employed: <input type="checkbox"/> Golden or Area A business license Retired: <input type="checkbox"/> Fulfill residency criteria	

<b>E: Combined Gross Household Income</b>	
<i>The maximum allowable gross annual household income is \$60,000. Slight variations may be considered by the Town of Golden's Manager of Development Services.</i>	
Most Recent Gross Annual Income (Applicant 1): <b>\$ _____ (Total A)</b> (Line 150 of CRA Tax Notice of Assessment)	Most Recent Gross Annual Income (Applicant 2): <b>\$ _____ (Total B)</b> (Line 150 of CRA Tax Notice of Assessment)
<b>Most Recent Combined Gross Household Income: \$ _____</b>	
Proof of Income: <input type="checkbox"/> 20__ Canada Revenue Agency (CRA) Tax Notice of Assessment	Proof of Income: <input type="checkbox"/> 20__ Canada Revenue Agency (CRA) Tax Notice of Assessment

<b>F: Combined Net Household Assets &amp; Liabilities</b>					
<i>All household assets <u>must</u> be disclosed, and proper documentation is required.</i>					
CASH AND INVESTMENTS	FINANCIAL INSTITUTION	ACCOUNT NUMBER	CURRENT BALANCE/ VALUE		
Cash in Bank: <input type="checkbox"/> Chequing <input type="checkbox"/> Savings <input type="checkbox"/> Other (specify): _____	_____ _____ _____	_____ _____ _____	\$ _____	\$ _____	
Investments: <input type="checkbox"/> Stocks/Bonds/ <input type="checkbox"/> Term Deposits <input type="checkbox"/> RRSPs <input type="checkbox"/> Annuities <input type="checkbox"/> Real Property <input type="checkbox"/> Other (Specify): _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____	\$ _____	\$ _____	
REAL ESTATE	Date of Assessment	CIVIC ADDRESS OF PROPERTY		VALUE	
Assessed value from most recent property tax bill.	_____	_____		\$ _____	
PERSONAL VEHICLES	Year	Make	Model	Kilometers	Estimated Value
The Golden Housing Committee will use the Canadian Black Book to confirm the value of vehicle (s).	_____	_____	_____	_____	\$ _____
	_____	_____	_____	_____	\$ _____
EQUITY IN BUSINESS					
<i>*Please contact the Golden Housing Committee to determine appropriate support documentation.</i>					
Business name and address:				Ownership %	\$ _____

OTHER ASSETS			
Record your down payment sources not listed above.			
<input type="checkbox"/> Gift <input type="checkbox"/> Loan <input type="checkbox"/> Inheritance <input type="checkbox"/> Other: _____			\$ _____ \$ _____ \$ _____ \$ _____
Personal Items valued at over \$5000 (ex. Snowmobile, trailer...)			\$ _____ \$ _____ \$ _____
Add total value of Assets →			<b>TOTAL ASSET VALUE</b> (All asset values in Section F (pages 4 & 5) combined = Total C). <b>TOTAL (C)</b> \$ _____
LIABILITIES			
	INSTITUTION	ACCOUNT NUMBER	CURRENT BALANCE/ VALUE
Credit Cards and Lines of Credit	<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	_____	\$ _____ \$ _____ \$ _____ \$ _____
Loans or Lease Obligations	<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	_____	\$ _____ \$ _____ \$ _____ \$ _____
Other Debt	<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	_____	\$ _____ \$ _____ \$ _____ \$ _____
Real Estate Mortgage	Lending Institution: _____ Contact Name: _____ Phone: _____		\$ _____
Add total value of Liabilities and Debt →			<b>TOTAL LIABILITIES/DEBT</b> (All liability values in section F combined = Total D). <b>TOTAL (D)</b> \$ _____
Calculate Net Household Assets →			<b>NET HOUSEHOLD ASSETS</b> (Total C - Total D = Total E). <b>TOTAL (E)</b> \$ _____

G: Pre-approved Mortgage		
<b>Applicants <u>must</u> apply for the maximum mortgage for which they could qualify and must show proof of pre-approval.</b>		
<input type="checkbox"/> Current Pre-Approved Mortgage Letter *(Letter must confirm that the amount approved is the maximum amount for which that applicant is eligible.)	Date Valid to (D/M/Y): ___/___/___ Financial Institution: _____	Approved for: \$ _____



810-9<sup>th</sup> Ave. S.,  
Box 350  
Golden, BC  
V0A 1H0  
Ph.250 344-2271  
Fax 250 344-6577

**I/We agree and give consent** to the Golden Housing Committee or their designate to:

- Contact my past and present employers to verify employment information;
- Contact my past and present landlords to verify residency;
- Request a written credit report on my behalf;
- Contact the financial institutions that I deal with to confirm balances and deposit amounts; and
- Use information from my application as part of a demographic profile of Affordable Housing applicants.

**I/ We certify that:**

- The information given on this return and in any documents attached is correct, complete, and fully discloses required information; and
- I am/We are responsible for keeping all required information up to date and accurate.

**Applicant 1:**

**Name** (please print):

\_\_\_\_\_

**Signature:**

\_\_\_\_\_

**Date** (D/M/Y): \_\_\_/\_\_\_/\_\_\_

**Applicant 2:**

**Name** (please print):

\_\_\_\_\_

**Signature:**

\_\_\_\_\_

**Date** (D/M/Y): \_\_\_/\_\_\_/\_\_\_

## **AFFORDABLE HOUSING APPLICATION CHECKLIST**

**Each applicant must remit the following along with the Affordable Housing Application:**

- BC Healthcare Card and One piece of valid photo ID (see restrictions in Application Form) to be provided upon submission of application.
- Proof of current address: Landlord letter; or Property Tax Assessment or rental lease agreement AND first and last month`s utility bills with street address; or other.
- Proof of previous address: Landlord letter; or Property Tax Assessment or rental lease agreement AND first and last month`s utility bills with street address; or other.
- Proof of employment: Three most recent pay slips; or employment contract/employer letter; or Town of Golden or Area A business license.
- Proof of income: Copy of most recent Canada Revenue Agency (CRA) Tax Notice of Assessment.
- Supporting documentation of ALL assets and liabilities.
- Pre-Approved Mortgage Letter \*(Letter must confirm that the amount approved is the maximum amount for which that applicant is eligible).

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**If you have any questions please contact the Manager of Development  
Services/Planner**

**250-344-2271 or email [planner@town.golden.bc.ca](mailto:planner@town.golden.bc.ca)**

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