

Tahltan Band Council

P.O. Box 46 Telegraph Creek, B.C. V0J 2W0 Telephone: (250) 235-3151 Fax: (250) 235-3244

Housing Application Form

Name:		Band No:	*****
Address		Phone:	
01470	<u> </u>		
ostal Code	·	-	Work ·
Marital Status	Married	Single	Divorced
	Widow(er)	Separated	Pensioner
lumber of Dependen	ts (living with you)		
Name	Relationship	Birthday	Age
1		-	
2.			
4.			
5.			
~			
	•		
Approximate year	existing home was bui	it:	. •
Type of home you	are living in:		
Own:	Rent:	Relative	s:
Presently Living or	n Reserve: Off	Reserve: I	.R#:

Source of Income:	Social Assistance	Employed	
•	Old Age Security	Other	
Amount of Income:	/ month		
Employer:	Phone:		
•			
Type of Housing Requi	red: New	Renovation	
Preferred Program:	R.R.A.P Soci	al Assistance Subsidy	
Location Preference			
Date:	Applicants Signature;		
	FOR OFFICE USE		
Housing	Application Date:		
Recommendations:			
Chief and Council Rema	arks:		