

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: Last First Initial	Band No:
	•
Address	Phone:
Town	
Postal Code	Work-
Marital Status Married	Single Divorced
Widow(er)	SeparatedPensioner
Number of Dependents (living with you)	· .
Name Relationship	Birthday Age
1	
Z.	**************************************
4.	
Α	· · · · · · · · · · · · · · · · · · ·
7.	
Approximate year existing home was buil	t:
Type of home you are living in:	·······
Own: Rent:	Relatives:
Presently Living on Reserve:Off	Reserve: I.R#:

Source of Income:	Social Assistance	Employed
	Old Age Security	Other .
Amount of Income:	/ month	
Employer:	Phone:	
Type of Housing Requir	red:NewI	Renovation
Preferred Program:	R.R.A.P Social	Assistance Subsidy
Location Preference		
Date:	•	
•	FOR OFFICE USE ON	•
Housing A	Application Date:	
Recommendations:		
9-19-14-14-14-14-14-14-14-14-14-14-14-14-14-		
Chief and Council Rema	rks:	
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