



**Housing Application**  
**River Bank Development Corporation**  
**1350 B 15<sup>th</sup> Ave W, Prince Albert, SK, S6V 5P2**  
**rbdc.housing2@sasktel.net**  
**Phone: 306-763-4221**  
**Fax: 306-763-4245**

***Applicant Checklist***

**Name:** \_\_\_\_\_

- Completed, signed, and dated application form
- Landlord reference form completed, dated, and signed by the landlord
- 2 Character references from someone other than family or friends signed and dated by the reference
- Proof of income

***Co-Applicant Checklist***  
***(Anyone over 18 must apply)***

**Name:** \_\_\_\_\_

- Completed, signed, and dated application form
- Landlord reference form completed, dated, and signed by the landlord
- 2 Character references from someone other than family or friends signed and dated by the reference
- Proof of Income

**INCOMPLETE APPLICATIONS CANNOT BE PROCESSED**

- ❖ No pets allowed
- ❖ Please attach any other information that you think will be useful
- ❖ If your contact information changes, please let us know
- ❖ Our units are in high demand and there is limited availability

**Please submit applications by emailing [rbdc.housing2@sasktel.net](mailto:rbdc.housing2@sasktel.net), faxing 306-763-4245, or in person at our office.**

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Housing Application**

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**Preferred Move Date**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Day Month Year

**Number of Bedrooms Required**

\_\_\_\_\_

**Applicant:**

\_\_\_\_\_  
Last Name First Name Initial

**Date of Birth:**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Day Month Year Martial Status: \_\_\_\_\_ Gender: \_\_\_\_\_

**Tel:** \_\_\_\_\_  
Home Cell

**Email Address:** \_\_\_\_\_

**Present Address:**

\_\_\_\_\_  
Street  
\_\_\_\_\_  
City Province Postal Code

How long have you lived there? \_\_\_\_\_

**Previous Address:**

\_\_\_\_\_  
Street  
\_\_\_\_\_  
City Province Postal Code

How long did you live there for? \_\_\_\_\_

**Present Living Accommodations:**

Number of bedrooms in current accommodation? \_\_\_\_\_

Monthly Shelter Costs:

Rent \_\_\_\_\_ Gas \_\_\_\_\_ Power \_\_\_\_\_ Water \_\_\_\_\_

Please explain your reasons for wanting to leave your present accommodations:

**Applicant:**

\_\_\_\_\_  
Last Name First Name Initial

**Date of Birth:**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Day Month Year Martial Status: \_\_\_\_\_ Gender: \_\_\_\_\_

**Tel:** \_\_\_\_\_  
Home Cell

**Email Address:** \_\_\_\_\_

**Present Address:**

\_\_\_\_\_  
Street  
\_\_\_\_\_  
City Province Postal Code

How long have you lived there? \_\_\_\_\_

**Previous Address:**

\_\_\_\_\_  
Street  
\_\_\_\_\_  
City Province Postal Code

How long did you live there for? \_\_\_\_\_

**Present Living Accommodations:**

Number of bedrooms in current accommodation? \_\_\_\_\_

Monthly Shelter Costs:

Rent \_\_\_\_\_ Gas \_\_\_\_\_ Power \_\_\_\_\_ Water \_\_\_\_\_

Please explain your reasons for wanting to leave your present accommodations:

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Applicant Financial Information		Co-Applicant Financial Information	
Wages (Monthly)	\$	Wages (Monthly)	\$
Social Services	\$	Social Services	\$
Training Allowance (PTA)	\$	Training Allowance (PTA)	\$
Employment Insurance	\$	Employment Insurance	\$
Child Support	\$	Child Support	\$
Employment Supplement	\$	Employment Supplement	\$
Child Benefit	\$	Child Benefit	\$
Other	\$	Other	\$
<b>Total</b>	<b>\$</b>	<b>Total</b>	<b>\$</b>
Employment Information:		Employment Information:	
Company Name:		Company Name:	
Company Address:		Company Address:	
Position Title:		Position Title:	
Supervisor Name:		Supervisor Name:	
Start Date		Start Date	
End Date		End Date	

### Names Of Others That Will Be Living With You:

Surname	First Name	Relationship to Applicant	Gender	Age

**I hereby acknowledge that the information contained in this application is correct.**

Dated at \_\_\_\_\_ this \_\_\_\_\_ of \_\_\_\_\_, 20\_\_\_\_  
Community Day Month Year

Applicant Signature: \_\_\_\_\_ Co-Applicant Signature: \_\_\_\_\_

