Meadowlands Housing Co-operative

66 – 19032 Advent Road, Pitt Meadows BC, V3Y 1S8

Phone: 604 465 1613

Email: manager@meadowlandscoop.ca

Office hours: Tuesday and Thursday 9:00 am - 5:00 pm

Closed Holidays

www.meadowlandscoop.ca

It is important to remember that housing cooperatives are independent of each other & have their own application and membership process.

Please note the following:

- You must be 55+.
- All units are non-smoking.
- We have a pet policy; 1 indoor cat permitted.
- We have an over housing policy.
- We have qualifying income ceilings.
- We require references.
- You must be in contact every 6 months or your application will be removed.
- You are expected to volunteer time to the Co-op.

Responsibilities and conditions of membership:

- Applicants must be able to live independently as Meadowlands is 100 % independent living and not a care home.
- Applicants must follow the rules and policies and understand the importance of being a good neighbour.
- Applicants are expected to volunteer when needed.

Your application on file does not guarantee you membership.

We thank all applicants for their interest in Meadowlands, however, only those candidates selected for an interview will be contacted.

Application process:

- Fill out the paper or online application and submit to the office.
- You must contact the office before the 6 months is up to keep your application active.
- If we do not hear from you, your application will be removed from our files, and you will need to reapply. Your application will be held on file for 6 months.

Process once on file:

- When a vacancy occurs, the Selections Committee will review all applications for interviewing.
- The application date does not determine when the applicant will be called for an interview.
- If called for an interview, you may refuse the first offer but if you refuse a second offer, your application will be removed from our files.
- The Selections Committee will present the applications to the Board of Directors that best fit the Co-op's criteria for membership at that time.

The Selections Committee reserves the right to choose the applicant that best suits the current needs of the Co-op. This will be the applicant that most demonstrates their willingness to contribute to the operation of the Co-op.

Here are our rules in regard to Membership. Our rules are consistent with the Cooperative Association Act of BC and are approved and filed with the BC Registry Service in Victoria.

RULE 2 Eligibility for membership

2.1 Principal membership

A person who is at least 55 years old may apply for admission as a principal member by submitting a written application for the purchase of Shares of the Co op (which must not be less than one Share), and any required payment for Shares, each as set by the Directors from time to time.

2.2 Associate membership

A married or common law partner of the Principal Member, at least 55 years of age, who lives in the Unit with a principal member on a full-time basis as their principal residence, may be admitted as an associate member by submitting a written application and a payment equal to the purchase price of one fully paid share.

2.3 Approval by the Directors/Selections Committee

The Directors and/or the Selections Committee may, in their discretion, approve or refuse any application for membership or may postpone making a decision about any application for membership.

2.4 Eligibility for membership

Subject to these Rules, eligibility for membership in the Co-operative is open in a non-discriminatory manner to individuals who are able to fulfill the responsibilities and conditions of membership.

Financial information:

- Your Notice of Assessment from Canada Revenue Agency is required.
- Shares are $1,820.00 for singles and $2,390.00 for couples.

Moving out information:

- A 60 day notice is required.
- Unit must be returned in a normal state of cleanliness/repair. All personal property (including furniture) must be removed.
- Move out charges such as interior cleaning and carpet cleaning will be deducted from your shares.
- Any damage above normal wear and tear could incur extra charges.

Question for the Co-op?

_____

_____

_____

_____

_____

_____

_____

Notes:

_____

_____

_____

_____

_____

_____

_____

Date application handed in _____

First check in date _____

Application for Membership

Member #1

Name _____

Birthdate _____

Phone _____

Email _____

Member #2

Name _____

Birthdate _____

Phone _____

Email _____

Current address

_____

_____

References (no relatives)

Current or past Landlord:

Name _____

Phone _____

Other:

Name _____ Phone

_____

Name _____ Phone

_____

Cooperative Involvement

Do you know anyone living at Meadowlands? Yes ☐ No ☐

Name _____

Do you agree to attend General Meetings? Yes ☐ No ☐

Are you willing to serve on the Board of Directors? Yes ☐ No ☐

Are you willing to serve on a committee? Yes ☐ No ☐

Please indicate the areas where you are willing to volunteer

Finance Yes ☐ No ☐

Grounds Yes ☐ No ☐

Buildings Yes ☐ No ☐

Social Yes ☐ No ☐

Selections Yes ☐ No ☐

Areas of expertise that may to useful to the Co-op.

_____
_____
_____
_____
_____

Cooperative Responsibilities

☐ You are 55+ years old.

☐ You declare all the information in this application is correct.

☐ Your signature gives Meadowlands Housing Cooperative permission to verify any of the information on this application and to perform a reference check.

☐ You understand that your application will be held on file for 6 months from date of receipt and that you must contact the office every 6 months for your application to remain active. If you do not check in, your application will be withdrawn.

☐ You understand that eligibility depends on you meeting all the criteria set out by the Selections Committee and approval by the Board of Directors.

☐ You understand that you are required to have personal content and liability insurance and proof of insurance must be submitted to the office annually.

☐ If accepted as a Member of Meadowlands Housing Cooperative, you agree to comply with the Co-operative rules and policies and amendments at all times.

Signature(s)

1. _____ Date _____

2. _____ Date _____

Personal Information Protection Statement

I agree that Meadowlands Housing Cooperative may keep the following information about me:

1. Financial information on household income when I moved into the co-op and my initial housing charges.
2. Financial information yearly to set housing charges for subsidized members, based on household income.
3. Eligibility information to qualify for the supplementary Homeowner Grant.
4. Co-op census information, including a record of all residents in each unit for security.
5. Relationship of co-applicant to applicant.
6. Whether I meet the age requirements for membership as set out in the co-op's Rules.
7. Pet ownership and emergency contact information.

I understand that Meadowlands Housing Cooperative will use this information to:

1. Contact me about this application.
2. Determine my eligibility for housing and membership in the co-op.
3. Establish the size of unit for my household, based on the occupancy standards.
4. Decide if I qualify for subsidy and to calculate the subsidy and housing charges yearly.
5. Determine eligibility for supplementary Homeowner Grant.
6. Ensure safe evacuation of all household members in case of emergency.
7. Comply with the co-op's operating agreement or program rules with CMHC (Canada Mortgage and Housing Corporation).
8. Decide on my request for an internal move.

I agree that this personal information may be made available to people in the following positions:

1. Co-op auditor
2. Employee of CMHC
3. Municipal employees dealing with Homeowner Grant (for grant application)
4. Co-op lawyer
5. Co-op staff or manager
6. Designated staff who have designated official duties for:
    - Applications for membership
    - Income review and setting housing charges
    - Applications for the Homeowner Grant
    - Collecting signatures for the Homeowner Grant
    - Collecting co-op census information
    - Maintain secure filing and storage of personal information (both hard copy and computer)
7. Board of Directors only if it is in connection with the Board's official duties

I have read and received a copy of this statement:

Signed: _____ Date: _____

Signed: _____ Date: _____