



HAISLA NATION

Rental Application Form: Applicant MUST be registered on the Haisla band list.

APPLICATION FOR EAGLE VIEW – 1-BEDROOM / 1-BATH

NAME <small>First Name and Last Name</small>	
PHONE NUMBER <small>000.000.0000</small>	
MAILING ADDRESS	
EMPLOYER	
EMPLOYED FOR	_____ MONTHS/YEARS

Please list who will reside in the residence with you and make note of the following points:

- NO pets, smoking, drugs or alcohol
- Must either use Pre-Authorized payments OR payroll deductions.
- Damage deposit required: \$265.00 - one half month's rent
- Rent will be \$530.00 (includes hydro)
- Tenant responsible for phone and internet
- Must include verification of income(s) and a letter of reference from your latest landlord.

If you wish, you may draft a letter to the Haisla Nation Housing Department, informing them of any situation they should be aware of.

Applicant's Signature	Date Applicant Signed
<i>Name of who received application</i>	<i>Date Received</i>