



DATE RECEIVED BY LH:

## Luther Heights

### Affordable Rental Application Form

Luther Heights' waiting list for our Affordable Rental suites is maintained on a "first come, first served" basis. When suites become available they are offered to those on the waiting list in order of sequence.

To qualify for an Affordable Rental suite at Luther Heights, your annual income, cannot exceed \$43,700 for a one bedroom or \$53,500 for a two bedroom.

NAME(S):	
PHONE:	
ADDRESS:	
CITY/TOWN/POSTAL CODE:	
DATE OF BIRTH:	
DATE OF BIRTH SPOUSE:	
ALTERNATE CONTACT PERSON:	
SUITE PREFERENCE:	<input type="checkbox"/> ONE BEDROOM <input type="checkbox"/> TWO BEDROOM
ANNUAL INCOME:	

PLEASE ATTACH A COPY OF YOUR MOST RECENT REVENUE CANADA "NOTICE OF ASSESSMENT".

PLEASE LIST ANY MEDICAL CONDITIONS YOU HAVE (if more space is needed use back of page):

To help minimize the possibility of misunderstanding and disappointment, our policy for residency at Luther Heights is summarized here:

***Each apartment is a fully accessible, private residence for seniors who are in good physical and mental health. They must be able to live alone and tend to all their personal needs without assistance or they must be prepared to allow us to help arrange support services sufficient to continue independent living.***

When your name comes up on the waiting list you will be asked to provide us with a doctor's report indicating any health issues. We will also ask that you allow us to assess your needs prior to offering you a unit in order to ensure that we are able to adequately meet your needs.

Please note that Luther Heights is a non-smoking facility – this includes in suites and on balconies and grounds. As well, Luther Heights has a "No Pets" policy.

Signature:

Date:



Priority Date	
Deposit Amount	
Preferred move in Date	

## Luther Heights

### Life Lease Waiting List Application & Deposit Form

Luther Heights Life Lease waiting list is maintained on a "first come, first served" basis and when suites become available they are offered to those on the waiting list in order of sequence.

**A \$100.00, non-interest bearing, refundable deposit is required to confirm the transaction.**

Balance of the purchase price is payable prior to possession date. An Offer to Purchase will be required when a unit of your choice is available. The actual sales price will be determined at the point of purchase.

NAME:	
ADDRESS:	
CITY/TOWN/POSTAL CODE:	
PHONE:	
DATE OF BIRTH:	
DATE OF BIRTH (SPOUSE):	
ALTERNATE CONTACT NAME & PHONE:	
SUITE PREFERANCE:	

PLEASE LIST ANY MEDICAL CONDITIONS YOU HAVE (if more space is needed please use the back of this page):

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SIGNATURE OF DEPOSITOR(S):	
DATE:	