

4. EMERGENCY HOUSING FUND APPLICATION FORM

Applicant Information:

1. Name: _____

2. Address: _____

City: _____ Province: _____ Postal Code: _____

4. Email Address: _____

5. Phone Number: (Primary) _____ (Secondary) _____

6. Are you a LNIB member?

Yes No

Household Information:

7. Are you applying for Health and Safety funding?: Yes No

8. Eligibility:

- Are you living in the home? Yes No
- Do you live in the Qualifying Area? (on an LNIB reserve or within 20km of Nicola Mameet IR#1) Yes No
- Does your housing issues fall within the Emergency Housing Fund Criteria? Yes No

Please briefly describe your housing issue that requires repair:

- _____
- _____
- _____

9. External Rebates and Grants (i.e. grants or rebates that are not funded by LNIB)

It is a condition of funding that an applicant (1) apply for all available external rebates or grants related to the applicable emergency repair; and (2) if the applicant receives an external rebate or grant, reimburse LNIB for the funding provided to the applicant under the Emergency Housing Repair Fund Policy up to the total amount the applicant receives in external rebates or grants. For certainty, an applicant is entitled to retain any portion of a rebate or grant that exceeds the total funding provided by LNIB to the applicant under this Policy.

- I agree to apply for all available rebates or grants that apply to the emergency repairs identified in this Application: Yes No

- If I am successful receiving any external rebates or grants that apply to the emergency repairs, I agree to reimburse LNIB for the funding provided to me under *the Emergency Housing Repair Fund Policy* up to the total amount received in external rebates or grants: Yes No

Documentation Checklist:

Please check the documents you have included with this application:

- Proof of membership (if applicable)
- Proof of Residency – a piece of mail with the Applicant name and address

Have you received Emergency Repair Funds in the past? Yes No

If yes, when and what repairs were completed?

Declaration:

I hereby declare that the information provided in this application is true and accurate to the best of my knowledge. I understand that providing false information may result in the denial of assistance. I authorize the release of information to verify the details provided in this application.

Collection of personal information

LNIB Administration will only request personal information that is necessary for LNIB Departments (responsible for Housing, Infrastructure and Health) and Council to assess this application for emergency housing repair funding and to have accurate records to support LNIB's financial management, which is a core function provided by our government to benefit Members. We will store your personal information securely and only for as long as is necessary to allow us to consider this application and to comply with our governance obligations related to the informed management of LNIB Lands and funds. We will not share your personal information publicly or to third parties without your express consent, except if required by law.

By signing this form, I consent to LNIB Administration collecting and storing my personal information required to process this application and to administer its financial management obligations.

I have read and agree with the above paragraphs.

Applicant's Signature: _____ Date: _____