

# YORKTON HOUSING CORPORATION

145 Jubilee Crescent - Yorkton, Saskatchewan - S3N 0T4

Phone: 306-783-0350

Email: [admin.yhc@sasktel.net](mailto:admin.yhc@sasktel.net)

[www.yorktonhousingcorporation.ca](http://www.yorktonhousingcorporation.ca)

**BRADBROOKE DRIVE** - low income housing for adults 18+ - studio/bachelor suite - approximately 280 square feet - built in 1959 - rent includes all utilities with free laundry - tenant is responsible for their own television and telephone services - \$125.00 damage deposit - applicants assessed based on level of need

**FROMM MANOR** - low income housing for adults 18+ - studio/bachelor suite - approximately 220 square feet - built in 2015 - rent includes heat and water - tenant is responsible for their own power, telephone and television services - no laundry available (Laundromat less than a block away) - damage deposit is \$125.00 - each approved applicant is point rated according to their need, with preference given to those who are living at risk - see handout for eligibility requirements

## PERSONAL INFORMATION

**Applicant's First & Last Name**

Applicant's Birthdate (m/d/y)

Current Address

City & Postal Code

Home Phone Number

Work Phone Number

Cell Phone Number

Email Address

**DO YOU REQUIRE PARKING?**

YES

NO

**DO YOU SMOKE?**

YES

NO

(all suites are non smoking)

**HAVE YOU HAD BED BUGS IN THE PAST 12 MONTHS?**

YES

NO

If yes, please specify if infestation has been treated, when and by whom:

## NEXT OF KIN TO CONTACT IN CASE OF EMERGENCY

Last Name

First Name

Relationship

Home Address

City & Postal Code

Home Phone Number

Work Phone Number

Cell Phone Number

## EMPLOYMENT HISTORY

Place of Employment

Do you work:

Full Time

Part Time

Sources of Income (example:  
Employment, Social Services, Workers'  
Compensation, Disability)

## OUTREACH WORKERS

Social Service Worker

Phone Number

Email Address

**Trustee's Name**

**Trustee's Phone Number**

**Email Address**

Supportive Living Worker

Office Number

Cell Phone Number

Email Address

**Mental Health Worker**

**Office Phone Number**

**Email Address**

## REFERENCE AND TENANCY HISTORY

Please complete the information below so YHC is able to contact your rental references

**Current Rental Agency**

Landlord/Manager's Name

Phone Number

Cell Number

Current Rent Paid

Tenancy Start (m/d/y)

**Previous Rental Agency**

Landlord/Manager's Name

Phone Number

Cell Number

Tenancy Start (m/d/y)

Tenancy End (m/d/y)

**Please explain your reasons for wanting to leave your current accommodation**

**Signature of Applicant**

**Date: (month/day/year)**