

Bowen Island Seniors Housing Co-Operative

Information and Application Instructions

Bowen Island Seniors' Housing Cooperative, (commonly referred to as Bowen Court), was built in 1982. It is one of more than 260 housing co-ops in British Columbia, established under the federal Co-op Housing Act and mandated to accept membership applications from residents anywhere in Canada.

A person who is 55 years old or older may apply for admission as a member and must meet the needs of the co-op in terms of income, and ability and willingness to participate in the management of the community. The co-op provides homes for the members who purchase a share, refundable after moving out, and pay a monthly housing charge.

Housing co-ops are responsible for their own governance and management. They elect, from among the membership, a Board of Directors to manage the business of the co-op. The Board has the legal power to direct the business of the co-op. Bowen Island Seniors Housing Co-operative is independent living; it is not a care home, not assisted living, not subsidized housing, nor does it qualify for SAFER.

It is useful to ask yourself if a housing co-operative is the right fit for you, as members are obligated to attend an annual general meeting as well as several board meetings per year. This involvement provides a democratic way of determining living environment, setting rules, deciding on budgets, and controlling administration, and having a say in how the co-op operates. It is the responsibility of each member to volunteer to sit on the board and committees, and participate in physical activities, to the best of their ability, such as seasonal clean ups and small maintenance tasks.

To apply for membership, the application form must be filled out and emailed with a non-refundable \$40 e-transfer sent to bishc.treasurer@gmail.com. Once an application is received, the applicant is sent a confirmation email. If the applicant meets all the requirements of the co-op an interview takes place at a later date. The most recent tax assessment must be provided at that time. The membership committee will then make recommendations to the Board, who have final approval of the applicant.

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Once an applicant is approved, they are put on a list. After being placed on the list they must contact the co-op every six months to confirm their continued interest in membership. If no such confirmation is received, their name may be removed from the list. If, after two years, an applicant has not been offered a suite, they may be asked to complete a new application form and/or come in for another interview, in order to keep the applicant's information and suitability for admission current.

Although housing charges are below market level rental fees, an applicant's income must not be below the income threshold which ensures members are not spending more than 30% of their income on housing charges.

Current housing charges, threshold incomes and share purchase prices are as follows:

Unit Size	Housing Charge	Annual Income Threshold	Share Purchase Price
1 bedroom	\$1,122	\$44,880	\$1,000
2 bedroom	\$1,366	\$54,640	\$1,250

Please complete the application form and email it to bowenisland@newlifemgt.com

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Application for Membership

Date: _____

Name: First _____ Last _____

Address: Street _____

City: _____ Prov: _____ Postal Code: _____

Phone: Home _____ / _____ / _____ Mobile: _____ / _____ / _____

Email: _____

Age Range 55 -- 64 _____ 65 -- 74 _____ 75+ _____ Birth Date: _____

If you have been at your address for less than 2 years, please provide previous address:

Address: Street _____

City: _____ Prov: _____ Postal Code: _____

If necessary, 2nd Applicant (Associate Member): must complete (Only to be used when a Couple is applying for membership).

Name: First _____ Last _____

Address same as above? _____ or

Address: Street _____

City: _____ Prov: _____ Postal Code: _____

Phone: Home _____ / _____ / _____ Mobile: _____ / _____ / _____

Email: _____

Age Range 55 -- 64 _____ 65 -- 74 _____ 75+ _____ Birth Date: _____

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If you are currently living in a Housing Co-Op, or have in the past, please provide the Co-Op contact information:

References: Please provide two (2) references who are not related to you:

Name: 1. _____ 2: _____

Phone: _____ / _____ / _____ _____ / _____ / _____

Connection to Applicant: _____ Connection to Applicant

Community or Volunteer Reference

Organization _____

Contact: _____ Phone: _____ / _____ / _____

Current, or Prior Employment / Work Experience:

Organization: _____ Position / Title: _____

Supervisor: _____ Phone: _____ / _____ / _____

Reason for leaving: _____

Size of Unit required: One Bedroom: Two Bedroom

Do you own a car: each unit is allocated one parking spot.

Vehicle Make: _____ Type: _____ License: _____

e.g. Car, SUV, CUV, Truck

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Strictly Confidential

This page will be kept separately to limit access to your financial information.

Household Income:

Member Applicant - first and last name _____

Name of Household Member	Source of Income: please check one.			Monthly Gross Income
	Pensions Employment Self-Employed	Income Assistance	Other	

Please record the monthly before-tax income (gross income) of each household member.

To process your application, please include copies of last year’s Revenue Canada Notice of Tax Assessment.

At the time of an interview, you will need to provide proof of this income.

Bowen Island Seniors Housing Co-operative reserves the right to conduct a credit check.

I declare the information provided in this application is true and complete. I have read and understood the Information and Application instructions. I have sent a non-refundable e-transfer for \$40 to bishc.treasurer@gmail.com

Name of Member Applicant (Please print) Signature

Date: / /
 Month Day Year