



CITY OF BRANDON AFFORDABLE HOUSING PROGRAM

Tenant Declaration



Property Owner Information			
Property Owner Name:			
Apartment Address:	Brandon	MB	Postal Code

Please return completed tenant declaration forms to:
 Brandon Neighbourhood Renewal Corporation Housing Coordinator
 Att: Teri Snaith
 Main floor, 410 9th Street, Brandon MB R7A 6A2
t.snaith@brandon.ca or 729-2412

Tenant Information

The City of Brandon and the Province of Manitoba, through the Brandon Neighbourhood Renewal Corporation provide financial incentives to property owners to develop affordable housing units for low-moderate income households. In order to qualify for the forgivable grant and tax credit, property owners must provide funders with a signed tenant form that confirms the rent charged and the household income of tenants on an annual basis for the duration of their funding agreement. Disclosure of this information by the tenant is voluntary but is required in order to guarantee that rents do not exceed the agreed upon amounts, inclusive of all utilities. All information disclosed will be treated as confidential by staff.

Tenant Name:	Apartment / Suite No.	Unit Type: <input type="checkbox"/> 1 bdrm <input type="checkbox"/> 2 bdrm <input type="checkbox"/> 3 bdrm <input type="checkbox"/> 4+ bdrm
Rent paid / month: \$	Rent includes (check all that apply) <input type="checkbox"/> water <input type="checkbox"/> electricity <input type="checkbox"/> heat <input type="checkbox"/> parking	

Please calculate the total gross annual household income for all individuals over the age of 16 living in the apartment. The gross annual income should be calculated by adding all sources of income for all people over the age of 15, living in the household. If the total gross income is less than \$49,999 please sign the declaration below.

I/We hereby certify I/We are the current renter(s) of this unit and that the total gross annual household income for all individuals over the age of 15 residing in the apartment listed above is \$49,999 or less.

Tenant Signature	Co-Tenant	Date
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For Staff Use only:

Project File: #	<u># of Funded Units</u>	<u># of Qualifying Units</u>
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