



**SIKSIKA NATION
HOUSING SERVICE AREA**



Housing Application Checklist

- Application**
- Cover letter**
- Basic Home Maintenance**
- Income Verification**

Date Submitted: _____

P.O. Box 1040 Siksika, AB T0J0S0
Telephone (403) 734-5200
Direct (403) 265-1491
Fax (403) 734-5235



Application for Rental Housing

Applicant Information		
Name:		
Date of birth:	Band Number:	Phone:
Current address:		
City:	Province:	Postal Code:
Own Rent Room & Board	Monthly payment or rent:	How long?
Previous address:		
City:	Province:	Postal Code:
Owned Rent Room & Board	Monthly payment or rent:	How long?
Employment Information		
Current employer:		
Employer address:		How long?
Phone:	E-mail:	Fax:
City:	Province:	Postal Code:
Position:	Hourly Salary (Please circle)	Annual income:
Not Employed:		
Source of Income:		
How Long:	Monthly Amount:	
How can we verify the information:		
Co-applicant Information, if Married		
Name:		
Date of birth:	Band Number:	Phone:
Current address:		
City:	Province:	Postal Code:
Owned Rent Room & Board	Monthly payment or rent:	How long?
Previous address:		
City:	Province:	Postal Code:

