

LOCH LOMOND VILLA APPLICATION FOR HIGH RISE APARTMENT

Please complete and forward the following to:

Accommodations Coordinator Wellness Centre 221 Ellerdale Street Saint John, NB, E2J 3S4

Tel: (506) 643-7100 or fax to (506) 643-7198 accommodations@lochlomondvilla.com

FULL NAME		DATE OF BIRTH	
Address	s:		
Telephone:		ail:	
☐ Live alone ☐ Live with family			
☐ High Rise 1 - Studio Apartment (approximately 265 sq. ft.)			
	☐ High Rise 1 - One Bedroom Apartment (approximately 410 sq. ft.)		
	□ High Rise 2 - Studio Apartment (approximately 278 sq. ft.)		
	☐ High Rise 2 - One Bedroom Apartment (approximately 373 sq. ft.)		
	□ NB Housing High Rise 3		
	☐ One bedroom (approximately 405 sq. ft) ☐ 2 (Rent depends on total income - 30%. You must appapply for High Rise 3). OTE: THERE IS A WAIT LIST FOR ALL APARTMENTS or deadline for move:		
-			
Name of Contact Person:			
	s:		
	rson is my:	☐ sister ☐ friend ☐ Other:	
Are you a smoker? Yes No Note: This is a non-smoking facility.			
Have you been assessed by Social Development? Yes No Name of Case Worker:			
Do you currently have Personal or Home Care Services: Yes No If so, how many hours:			
How die	d you hear about the Loch Lomond Villa?		
Have you seen our online virtual apartment tour at lochlomondvilla.com? $\ \square$ Yes $\ \square$ No			
Signature Date of Application			