



1. APPLICANT INFORMATION

Primary Appli	cant:							DATE OF BI	RTH
							/		/
First Name			Initial	Surname			Day	Month	Year
Street Address			City	Province			Postal C	lode	
Mailing address if	f different thar	n above (R.R. #, B	ox#, etc.)						
Primary Phone		Work F	hone	Mobile Ph	one				
Email Address					Add to MN–S emai	l list? O Y	res O no		
Marital Status:	\bigcirc Single	\bigcirc Married	O Common	Law O Separat	ed O Divorced	O Widowed	d O Othe	r	
Métis Status (Plea	ase check one	e): O Métis Cit	izenship Card	O Métis Citizens	hip Application sub	omitted awaiting	g confirmation	n	
Gender:	○ Male	\bigcirc Female							
Secondary Contac (OTHER THAN THOSE		S APPLICATION)		Pr	imary Phone				
CO-APPLICAN	T (IF ANY):				purchased as a co-	applicant		DATE OF BI	RTH
First Name		Initial		Surname			/ Day	Month	/ Year
Street Address			City	Province			Postal C	Code	
Mailing address if	f different thar	n above (R.R. #, B	ox#, etc.)						
Primary Phone		Work F	hone	Mobile Ph	one				
Email Address					Add to MN–S emai	l list? O Y	∕es ○ no		
Marital Status:	○ Single	○ Married	O Common	Law O Separat	ed O Divorced	O Widowed	d O Othe	r	
Métis Status (Plea	ase check one	e): O Métis Cit	izenship Card	O Non-Métis					
Gender:	○ Male	○ Female							





2. HOUSEHOLD COMPOSITION, EXCLUDING APPLICANT(S)

	Name	DOB DD/MM/YYYY	Male/Female	Relationship to Applicant (Daughter, son, partner, spouse etc.)		old member, please opriate column. Non-Indigenous
				partner, spouse etc.,	Metis	Non-margenous
1.						
2.						
3.						
4.						

Do all of the people listed live with you full time? \bigcirc Yes \bigcirc No If no, provide the name of the person(s) & number of days per week they live with you.

	Name	# of Days/Week	Reason for not living with you full time
1.			
2.			

3. COMBINED GROSS HOUSEHOLD INCOME & NET WORTH

What is your combined Gross Household Income

	\$					
--	----	--	--	--	--	--

Please submit the following proof of income (copies) with this request: Two years CRA Notice of Assessment and Notice of Reassessment (if applicable). Note: Copies of income tax returns may be required, two years T4 slip(s), and two current pay stubs from source(s) of income.

For **self-employed applicants**, Two years CRA Notice of Assessments and/or Accountant Prepared Financial Statements/Statement of Business Activities will be required.

For this application, self-employment income will be reduced by all deductions allowed by the Canada Revenue Agency, except for the following:

- 1. Capital Cost allowances for the depreciation of assets;
- 2. Rent paid by the individual, where the individual operates the business from their residence;
- 3. Childcare expenses.





Please complete the following table detailing the combined personal net worth of all applicants:

Assets	Value	Liabilities	Balance Owing	Monthly Payment
Cash on hand		Student loan		
Cash in the bank		Line of credit		
RRSP & savings		Bank overdraft		
Auto & truck		Bank loan		
Model / year		Credit cards (itemize)		
Model /year		Credit cards (itemize)		
Investments		Credit cards (itemize)		
Recreation vehicles		TOTAL LIABILITIES	\$	\$
Other assets		TOTAL NET WORTH	\$	\$
TOTAL ASSETS	\$	(Assets minus Liabilities)		

4. PROGRAM PRIORITIES

Please identify which if any of the following Program Priorities apply (Check all that apply):

 \bigcirc Residing in social housing \bigcirc Escaping situations of violence

Briefly explain:





5. OTHER CONCERNS

O Overcrowding O Health and Safety O Accessibility need O Family reunification
Briefly explain:
6. PRESENT ACCOMMODATIONS
6. PRESENT ACCOMMODATIONS At present, do you:
At present, do you:
At present, do you:
At present, do you: Rent or Live with parents or a family member Other, explain
At present, do you: Rent or Live with parents or a family member Other, explain
At present, do you: O Rent or O Live with parents or a family member O Other, explain If you are a current tenant, please provide name and phone number of landlord or the Social Housing provider:
At present, do you: O Rent or O Live with parents or a family member O Other, explain If you are a current tenant, please provide name and phone number of landlord or the Social Housing provider: Name: Primary Phone:
At present, do you:

If yes, provide reason(s) below





7. ADDITIONAL INFORMATION

Have you signed an Agreement or Offer of Purchase and/or Sale? O Yes O No

*If you require MN–S First-Time Home Buyers funds for a home purchase, please do not make an offer on a home unless you have received written confirmation that your MN–S First-Time Home Buyers Application has been approved.

Do you hav	Do you have a Lawyer?						
○ Yes	○ No	If Yes, Contact Info:					
Do you ha	ve a Realtor?						
○ Yes	O No	If Yes, Contact Info:					
Name of your Financial Institution & Contact Information:							
Name:		Branch:	Contact Info:				

8. EMPLOYMENT HISTORY

	Please indicate applicant and co-applicant employer(s) name, address and/or other sources of income. If Length of Employment is less than one year please list previous Employer as well.					
	Applicant Name	Employer Name	Employer Address	Length of Employment		
1.						
2.						
3.						
4.						

9. RESIDENCE HISTORY

	Please provide your residence history (addresses) for the last three (3) Years:	Period of residency (DD/MM/YYYY) to (DD/MM/YYYY)
1.		
2.		
3.		





10. HOW DID YOU HEAR ABOUT THE MN-S FIRST-TIME HOME BUYERS PROGRAM?

Please choose all that apply:

○ MN–S Social media

○ MN–S Local

O MN–S Affiliate

○ MN–S Regional Office

 \bigcirc Information Session

O MN-S Website

O SMEDCO

 \bigcirc Word of Mouth

○ Other

11. MN-S FIRST-TIME HOME BUYERS PROGRAM TERMS

SaskMétis Economic Development Corporation, the administrator for the FTHBP will enter into a forgivable loan agreement (FLA) with each successful Métis applicant prior to advancing funds and will ensure that the terms of the FLA include a covenant by the Métis applicant to repay all or part of the advanced funds to SMEDCO if the terms of the FTHBP are not fulfilled ie. The property ceases to be the applicant's primary residence or the Métis applicant obtains their Bill C-31 First Nation Status under the Indian Act within ten (10) years following the date of possession. This forgivable loan agreement will be registered as a Mortgage against the title to your home property until such time as our commitment under the FTHBP and FLA has been fulfilled. The mortgage represents the security & commitment to the FTHBP in the event of a default in the mortgage or terms of the FLA.

If successful, funds will be advanced to the solicitor acting for the purchaser to be held in trust pending completion of the sale. No funds will be advanced to any other party. The funds advanced are subject to the trust condition that the funds will be returned to SMEDCO if the transaction is not completed for any reason. If funds are returned to SMEDCO and the applicant wants to re-apply for the funding, the applicant must re-submit their application and meet the eligibility requirements.

All applicants who give personal information to SMEDCO shall be required to consent to the release of that information to the MN–S in order to comply with the Personal Information Protection and Electronic Documents Act (PIPEDA) and Freedom of Information and Protection of Privacy Act (FIPPA). The information provided on this application will be used for the purpose of determining eligibility and potential successful selection for the MN–S FTHBP Assisted Homeownership program.





The undersigned consents to the release of information in this application form and the attached documents if required by law. Any questions regarding the collection or release of this information should be directed to:

First-Time Home Buyers Program c/o SaskMétis Economic Development Corporation 237 Robin Crescent Saskatoon, Saskatchewan S7L 6M8

Local: 306 477-4350 Fax: 306 373-2512 Email: FTHBP@smedco.ca

*Please be advised that completion and submission of the MN—S First-Time Home Buyers Program Application Form does not guarantee application approval.

12. APPLICANT DECLARATION

The undersigned hereby understands, agrees, and declares that:

- The information provided on this request will be used for the purpose of determining preliminary eligibility for the MN–S First-Time Home Buyers Program (FTHBP)
- A final written confirmation of eligibility for program funding will be issued after all other program requirements are met and prior to any forgivable loan agreement being signed;

I/we consent to the sharing of my/our information with SMEDCO or MN-S strategic partners.

l/we, certify that the information provided in this application is true, complete and accurate to the best of my/our knowledge. l/we acknowledge that knowingly making a false or fraudulent application shall be considered sufficient cause for refusal of this application for the MN–S First-Time Home Buyers Program. l/we understand the terms and conditions for compliance re at the sole discretion of the Métis Nation Saskatchewan and/or the Program Administrator, SaskMétis Economic Development Corporation (SMEDCO). Furthermore it is understand and l/we are agreeable to SMEDCO conducting a full credit investigation including pulling an Equifax/Credit Bureau Report on us. l/we have read, understand and agree to the programs terms and conditions.

Before submitting this application, the signature(s) MUST be witnessed & dated using the space provided below :

Primary Applicant Name (required) (please print)	Primary Applicant Signature	Date
Co-Applicant Name (if applicable) (please print)	Co-Applicant Signature	Date
Witness Name (required) (please print)	Witness Signature	Date
Submit Applications to:		
First-Time Home Buyers Program c/o SaskMétis Economic Development Corporation 237 Robin Crescent Saskatoon, Saskatchewan S7L 6M8	Local: 306 477-4350 Fax: 306 373-2512 Email: FTHBP@smedco.ca	