



Division/Branch
 Address
 Town/City MB Postal Code
manitoba.ca/housing

Name
 Title
 E-mail address
Tel: (204) 945-xxxx
Toll Free: 1-800- if avail
Fax: (204) 945-xxxx

<<Date>>

<<Leaseholder name>>

<<Co-leaseholder name>>

<<Address>>

<<City/town, MB postal code>>

Client ID: <<Client ID>>

Client ID: <<Client ID>>

Interview Confirmation

Dear << Applicant and Co-applicant >>:

This letter is to confirm your Manitoba Housing Interview on:

Date: [[Enter Date of Interview]]
Time: [[Enter Time of Interview]]
Location: [[Enter Address of Interview]]

The purpose of the interview is to confirm your application information, determine eligibility and assess your housing needs. As the interview may take up to 90 minutes, please plan accordingly.

Please bring the following supporting documentation to the interview:

- Identification (for all household members)¹
- Citizenship¹
- Custody arrangements
- Income [[Income documentation for: (Enter name(s))]]
- Consent to Release Certified Income Information Form [[Consent form to be signed by: (Enter name(s))]]
- Current monthly rent charge
- Mortgage payment (including utility charge)
- Homelessness
- Domestic violence
- Risk of homelessness
- Housing as a barrier to reunification
- Permanent or temporary disability [[Enter name(s) of person(s) with Permanent or temporary disability]]
- Need to move closer to work, school, child care or support services
- Inadequate housing
- Education status [[Education status for: (Enter name(s))]]
- Housing Details Form
- Medical Information Form [[Medical Information Form for: (Enter household member's name(s))]]
- Proof of vaccination for your cat or dog

(Please see the enclosed list of acceptable forms of documentation)

¹ All applicants must provide this proof.

If you need to reschedule your interview or need additional time to gather your supporting documents, please call us immediately at the number below. As a reminder, should you feel it would be beneficial to bring a support person or advocate with you to the interview, please arrange for them to accompany you.

If you have any questions or concerns, please contact me.

Regards,

<<Sender Name>>

<<Sender Title>>

Tel: <<Sender Tel>>

Encl.: [[Delete those that don't apply

Acceptable Documentation:

Consent to Release Certified Income Information

Housing Details Form

Medical Information Form]]

<<Date>>

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<<page#>>

Available in alternate formats upon request.