

Schedule L: APPLICATION FOR FINANCIAL ARRANGEMENTS

Brooks Co-Operative Homes Inc.

Name of Members (please print): _____

Address: _____ Sheridan Park Drive, Unit # _____ Mississauga ON L5K 1C6

Please state the reason(s) that you are requesting late payment of your Housing Charge:

Please state the date(s) you propose to pay your Housing Charge and amount(s) of your payment(s):

Date: _____ Signature of Members: _____

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TO BE COMPLETED BY THE OFFICE ONLY

The office has compared your “Application for Financial Arrangement” above and based on the yearly history of your applications has made the following decision on your request for late payment, as marked below:

- _____ 1. Your _____ application was **approved**, and you **will not be required to pay the \$20.00 late payment charge**, as your request was made four days before the first of the month.
- _____ 2. Your _____ application was **approved** but you **will be required to pay the \$20.00 late payment charge**, as your request was not made four days before the first of the month.
- _____ 3. Your _____ application was **approved** but you **will be required to pay the \$20.00 late payment charge**, as the Finance Policy only allows for three applications for financial arrangements within a calendar year.
- _____ 4. Your _____ application was rejected based on the date of repayment not being in the same month of the housing charge being owed You will be required to pay the housing charge plus the \$20.00 late penalty or attend the next Board of Directors meeting on: _____ if you would like to ask for a performance agreement.

Date

Authorized Signature