

# ILARION RESIDENCE

2509 Louise Street  
Saskatoon, Saskatchewan S7J 3L7  
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## Application for Independent Living Accommodations

1. Name: \_\_\_\_\_  
Surname First Initial
2. Present Address: \_\_\_\_\_  
Street or Box # City & Prov. Postal Code
3. Phone Number: \_\_\_\_\_ Cell: \_\_\_\_\_
4. Marital Status: M \_\_\_\_ S \_\_\_\_ Div \_\_\_\_ W/Wdr \_\_\_\_ Spouse: \_\_\_\_\_
5. Date of Birth: Day \_\_\_\_ Month \_\_\_\_ Year \_\_\_\_ Spouse: Day \_\_\_\_ Month \_\_\_\_ Year \_\_\_\_
6. Email: \_\_\_\_\_
7. Accommodation Desired: select one or more

### **Rental Suites**

Size:

- \_\_\_\_ Bachelor 400 SQ FT  
\_\_\_\_ One Bedroom 550 SQ FT (76 suites in total)  
\_\_\_\_ One Bedroom 800 SQ FT (13 suites in total) Singles may apply but priority given to couples  
\_\_\_\_ Two Bedroom 800 SQ FT (3 suites in total) Singles may apply but priority given to couples

Floor: \_\_\_\_\_ Main Floor: \_\_\_\_\_ Second Floor: \_\_\_\_\_ Any: \_\_\_\_\_

Is your income below \$19 600 per year and desire a subsidized suite only? (yes or no) \_\_\_\_\_

(Depending on your income, the subsidy may not be significant. This limits the availability of suites available)

### **Life Lease Suites:**

Size:

- \_\_\_\_ One Bedroom 720 SQ FT  
\_\_\_\_ Two Bedroom 850 – 1000 SQ FT

8. Date you would like to move in? \_\_\_\_\_

9. Alternate Contacts:

1) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

2) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

10. Why do you wish to move into this residence? \_\_\_\_\_

11. Describe your present health status: Good \_\_\_\_\_ Fair \_\_\_\_\_ Poor \_\_\_\_\_

Do you require on-going treatment for an illness now? \_\_\_\_\_

If yes, please specify: \_\_\_\_\_

Which of the following do you need to carry out activities of daily living?

Home Care \_\_\_\_\_ Wheelchair \_\_\_\_\_ Walker \_\_\_\_\_ Scooter \_\_\_\_\_

Please be informed that any tenant who requires special care or medical aid while in Ilarion Residence must arrange it with his/her family. Ilarion Residence does not assume any responsibility for specialized care or medical attention.

Physician's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

I/We the undersigned hereby state that to the best of my/our knowledge the information contained in this application is true and accurate and I/We are prepared to support it with further information when considered necessary.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Spouse's Signature

Accepted for Ilarion Residence

\_\_\_\_\_  
Administrator

**HOUSING FOR SENIORS – ILARION RESIDENCE**

Ilarion Residence is operated by the Ukrainian Senior Citizens Society.

This two story building is located in a quiet residential area in Eastview, close to Market Mall and other community services.

### **Rental Suites:**

We have 132 suites:

- 30 Life Lease
- 10 Bachelor suites – 400 sq. ft
- 76 one bedroom suites – 560 sq. ft
- 13 one bedroom, two bathroom suites – 800 sq. ft
- 3 two bedroom suites – 800 sq. ft

Our services/ amenities include:

- Completely wheelchair accessible
- Free laundry facilities on each floor
- Recreational facilities including exercise room, lounges, shuffleboard, pool and puzzle tables
- City bus stop directly in front
- Chapel
- Guest suites
- Beauty Salon
- Library
- 3 computers with internet access
- Gazebo and courtyards
- All utilities included in rent
- Shopping mall within 2 blocks
- Nurse visits twice a month
- Podiatrist visits once a month

### **Regulations Pertaining to the Landlord/ Tenant Lease Agreement**

1. Singles may apply but couples are given priority to rent two-bedroom and large one-bedroom, two bathroom suites. At the death of one, the survivor may move to a smaller suite if desired.
2. Movement from one suite to another in the building will not be allowed unless it is to a different size or type of suite.
3. A tenant may not sublet their suites.
4. Ilarion Residence provides heats, water, electricity, stove, and fridge. The tenant shall be responsible for their own telephone and cable/ internet services. If the tenant has an air conditioner there is an additional charge of \$20.00/month for the months of May – August regardless of the frequency of use. An electrified parking stall is an additional \$25.00 per month.
5. The Maintenance person or Administration or delegate may enter any suite when it is deemed necessary for emergency or service reasons.
6. Rent shall be paid in advance or on the first day of the month. Direct deposit is preferred.
7. The tenant is responsible for securing a tenant pack for insuring their belongings and liability.
8. The tenant is responsible for the security of the suites by keeping doors locked and windows locked when away. Door chains are not allowed for fire safety reasons.
9. Alterations within suites are not permitted without the consent of Administration and/or the Board of Directors.
10. Tenants are responsible for the cleanliness and sanitary conditions within the suites. This includes disposal of garbage to the outdoor disposal bin, and shampooing carpets when necessary.
11. Pets are allowed during the day only. No overnight visits.
12. Visitors may stay with a tenant or in the guest suite for no more than seven days, except by special permission.
13. Tenants shall avoid the spread of cooking odours by keeping their doors closed and using kitchen fans when cooking.
14. Written notice to vacate must be given on or before the last day of one month of tenancy to be effective on the last day of the following month of tenancy.
15. The owners expect all tenants to use proper care and attention in the use of laundry equipment, appliances, recreation areas and lounges.
16. Rules and regulations in the tenancy agreement must be followed at all times.
17. Smoking is not allowed in the building.