



LONG TERM CARE
726 New Hampshire Street
Waterloo, ON N2K 4M1
T: 519.885.4810
F: 519.885.6720

RETIREMENT SUITES
720 New Hampshire Street
Waterloo, ON N2K 0A3
T: 519.885.0090
F: 519.885.6720

**Delphine & Lloyd Martin
Apartments
(Seniors Independent Living)**
730 New Hampshire Street
Waterloo, ON N2K 0H8
519.885.0090 ext 252

Waiting List Application

| PERSONAL INFORMATION | |
|--|---|
| Name: _____ | |
| Address: _____ City: _____ | |
| Postal Code: _____ | |
| Ph #: _____ | |
| Email: _____ | |
| Alternate Contact Information – To be Contacted First, Please Check <input type="checkbox"/> | |
| Name: _____ Relation: _____ | |
| Address: _____ City: _____ | |
| Postal Code: _____ | |
| Ph #: _____ | |
| Email: _____ | |
| Accommodation Requested | |
| Retirement Suites: Full Service Assisted Living: Studio Suite ('A') _____ (Single Occupant Only) 1 Bedroom ('B', 'C', 'D', 'AA') _____ Supportive Living (Apartment): 1 Bedroom ('E') _____ 2 Bedroom ('G', 'H', 'I') _____ Independent Living (Apartment): 1 Bedroom ('E') _____ 2 Bedroom ('G', 'H', 'I') _____ | Delphine & Lloyd Martin Apartments (Independent Living): 1 Bedroom _____ 2 Bedroom _____ Affordable Housing (1 bedroom): _____ ** Income Criteria & Application must be completed Please contact the Director of Housing for further Information (519.885.0090 ext 252) Garden Homes (Independent Living, 'Right to Occupy'): 1 Bedroom Floorplan _____ 2 Bedroom Floorplan _____ |

I have requested to be placed on the waiting list at Parkwood Seniors Community (Retirement & Independent Living) for the accommodation(s) checked above. It is understood that I will be contacted in the event that accommodation becomes available. I further understand that this application does not commit me in any way to enter into a Tenancy Agreement with Parkwood Seniors Community.

I also acknowledge it is my responsibility to inform Parkwood Seniors Community of any changes to the above information.

Signed: _____

Date: _____