



Swan Lake First Nation Housing Department

P.O. Box 368, Swan Lake, MB, R0G 2S0
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Email: slfnhousing@slfn293.ca

Addition to Unit Request Form

Tenant(s): _____

Unit #: _____

Contact No.: _____

Email: _____

Reason for Request (include brief description):

Household Information: (list all individuals currently residing in your unit)

Name	D.O.B	Gender	Relationship

Tenant Signature: _____ **Date:** _____

******For Office Use Only******

Date Received: _____ **Received by:** _____

☐ Approved

☐ Declined

☐ Waitlisted

Comments/Notes: _____
